

Drinkers, drunkards and dipsomaniacs.

Alcohol, doctors and class in Belgium. 1850-1914.

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Abstract

Drunkenness was always a profoundly ambiguous state and different ways of drinking too much and more importantly, different members of society getting drunk, warranted separate explanations of the problem. Through the construction of 'the drunkard', boundaries delineating normal and acceptable behaviour were challenged and re-negotiated. This thesis considers how the preoccupation with excessive drinking and its shifting interpretations revealed wider social and political concerns in a period of profound social change in Belgium from the mid-nineteenth century towards the First World War. Those involved in the debates about drunkenness were in the first place doctors, who shifted the understanding of drunkenness as a vice towards an interpretation of it as a pathological condition. Through an analysis of political debates, the thesis aims to understand how medicalised ideas on moral issues merged into and were at the same time informed by fears of working class social and political demands. Medical writings reveal a fluctuating, ever more specialised language to identify different types of drunkenness. Ideas of 'dangerousness' informed an explanation of the problem as a hereditary disorder related to madness and crime. A detailed case study based on patient records, of the diagnosis and treatment of alcoholic patients of two asylums in Ghent, one public, the other private, between the period 1850-1914, shows how in the daily confrontation between doctor and drunkard, ideas and practices merge. The outcomes of these dialogues provide insights into the 'structure of feeling' of a stratified society at a moment of profound social change. The thesis finally explores representations of the drunkard in fictional accounts through examples from both Flemish and Walloon literature and art but also through 'popular' fiction like folk stories and songs. Here, the concerns expressed by medical and political elites, re-emerged within a wider cultural setting.

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Introduction

Drinking is an expression of culture: a social force whereby identities are constructed. Social and convivial drinking confirm belonging to a certain group, resulting in a positive construction of identity. Often when it becomes too much, however, drinking can also become a negative expression of identity; then it belongs to the 'other': the drunk, the alcoholic. As drinking and attitudes towards it are culturally and historically specific, its language has changed over time. Drinking can be considered as both social and anti-social behaviour, normal and abnormal. Where excess begins and when drunkenness becomes 'habitual' is not clear and depends on who drinks, where, how one behaves and how this behaviour is perceived. At different times, social circumstances, biological constitution or moral failure have been considered, to various degrees, responsible for alcoholic excess.

Historians have located a broad shift in the understanding of drunkenness in the second half of the nineteenth century: from an explanation of intemperance as a vice that could eventually damage the health of individuals and society, towards an interpretation in which habitual drunkenness was perceived as directly related to biological disorder. It became a pathological condition, often identified as an inheritable degenerative disease.¹ From the mid-nineteenth century onwards, as science became a dominant cultural idea, concepts of biological predisposition became ever more predominant in medical

¹ For Britain see PRUITT, A. A. 'Approaches to alcoholism in mid-Victorian England.' *Clio medica*. IX, 2, 1974. 93. & JOHNSTONE, G. 'From vice to disease? The concepts of dipsomania and inebriety, 1860-1908.' *Social and Legal Studies*. V, 1996. 37. For France: SOURNIA, J. C. *Histoire de l'alcoolisme*. Paris. 1986., NOURRISSON, D. *Le buveur du XIXe siècle*. Paris. 1990. For the USA: LEVINE, H. G. 'The discovery of addiction: Changing conceptions of habitual drunkenness in America.' *Journal of Studies of Alcoholism*. XXIII, 1978. & CONRAD, P. & SCHNEIDER, J. W. *Deviance and medicalization, from badness to sickness*. St. Louis. 1980. 73-109

discourse. Habitual drunkenness became defined as an essentially inherited disorder and alcoholism became central to concepts of degeneration.²

Influenced by the work of Michel Foucault, this shift has been attributed to the redefinition of deviance within 'modern capitalist society', which saw drunkards as unproductive and therefore unwanted members. The medical profession, and more especially the upcoming psychiatric field, was the disciplining agent and its discourses on drunkenness affected wider society.³ Initial studies of the increasing influence of medical discourses on alcohol on the public debates and legislation in Belgium endorse these views.⁴

This shift was a complex cultural event as the relationship between excessive drinking and disease was always ambiguous. The last quarter of the nineteenth century was a period of profound change in Belgium, in which power structures were redefined and in which the established social order was severely challenged. The medicalisation of drunkenness worked within broad culture, intersecting with wider social and political debates. What doctors meant when they talked about drunkenness as a disease was never clear-cut and neither were the ways in which they differentiated it from other forms of drunkenness, still considered to be a vice. The changing language on

² GILMAN, S. C. 'Political theory and degeneration.' in CHAMBERLIN, J. E. & GILMAN, S. L. eds. *Degeneration: the dark side of progress*. New York. 1985. 168.

³ FOUCAULT, M. *Madness and civilization: a history of insanity in the Age of Reason*. London. 1989. Chapter VIII. 221-240.

⁴ see further Introduction pg. 15.

drunkenness always carried with it normative assumptions, which, in the words of Roger Cooter, make the subject 'historically complex'.⁵

Specialist in mental health, or *aliéniste* François Lentz understood this, when he wrote in 1899:

It is first and foremost important to agree about the words, because nowhere more than in the alcoholic domain [*le domaine alcoolique*], confusion about words has led to confusion of ideas, so much that that wretched alcohol, even in the dispassionate domain of science, has the gift of troubling brains.⁶

The excessive use of alcohol troubled brains in more than one way because it could never be a straightforward medical diagnosis. Drunkenness was a slippery, cultural construct, imbedded in language. Examining how drunkenness was labelled, can clarify underlying assumptions.⁷ In establishing the relationship between disease and specifically mental disease and drunkenness, issues of biology, the social environment and morality were constantly intertwined.

As well as being concerned with identifying shifts from a moral to a medical paradigm on drunkenness, I am equally interested in tracing continuities within the historical complexity of the making of drunkenness. In doing this I need to approach drunkenness in relation to cultural categories in which it was imbedded, and I focus in this work specifically to that of social class.

⁵ COOTER, R. *The cultural meaning of popular science: phrenology and the organization of consent in nineteenth-century Britain*. Cambridge. 1984. 2.

⁶ *Bulletin de la société de médecine mentale de Belgique* (B.S.M.M.B.) CIII, 1899. 211.

⁷ PORTER, R. 'The patient's view. Doing medical history from below.' *Theory and Society*. XIV, 1985. 187.

In Belgium, the cultural formation of 'class', as discursively constructed, has only been very partially studied.⁸ In my attempt to it, in this work, I still believe that class and power were rooted in the realities of material life.⁹ However, I understand class more widely as a cultural construct, as a social formation: ambiguous and never clear-cut.¹⁰ Class became the central cultural category around which drunkenness was organised and conversely, drunkenness would become an important marker for class formation. I will furthermore point out how the concept of social class was always intertwined with other shifting ideas, for example on gender or ethnicity, which in their turn influenced the meaning of drunkenness.¹¹

Class being such a complicated concept, ^h throughout the thesis I consistently used the terms 'lower or working class' versus 'bourgeoisie'. 'Bourgeoisie' then indicates a broad layer of society, including at the one end of the social scale wealthy proprietors and at the other struggling, petite-bourgeois office clerks, for example. What the bourgeoisie have in common, is that they consider themselves as 'different' from the working class.¹²

⁸ Geoffry Crossick has elegantly elaborated the relationship between the ideology of the catholic party and the formation of the 'petite bourgeoisie' in Belgium. CROSSICK, G. 'Metaphors of the middle: the discovery of the petite bourgeoisie. (1880-1914)' *Royal Historical Society Transactions*. 1994. 251-279. & VAN DEN EECKHOUT, P. & SCHOLLIERS, P. 'Social history in Belgium: old habits and new perspectives.' *Tijdschrift voor sociale geschiedenis*. XXIII, 2, 1997. 165.

⁹ unlike post-modernists like Patrick Joyce, JOYCE, P. ed., *Class*. Oxford, 1995. 8.

¹⁰ WILLIAMS, R. *Keywords: a vocabulary of culture and society*. London. 1988. 'class' 60-69.

¹¹ ERIKSEN, S. 'Alcohol as gender symbol.' *Scandinavian Journal of History*. XXIV, 1, 1999. 45-73.

¹² When Jurgen Kocka talked about the 'middle classes' he used the term interchangeably with 'bourgeoisie', but he did not include in his study the difficult case of the 'lower middle classes', or the 'petite-bourgeoisie.' KOCKA, J. 'The middle classes in Europe.' *The Journal of Modern History*. LXVII, Dec., 1995. 784. I have chosen to consistently use the word 'bourgeois', including both 'haute'- as 'petite-bourgeoisie'. This was how those social groups consciously identified themselves in the period, in clear opposition to the 'working class'. I insisted to using this perhaps crude, Marxist binary language to stress an important aspect of class

At the centre of this thesis is the search for the cultural construction of a medical theory, but I do not want to approach the history of medicalisation simply as a 'nefarious collaboration of experts and state authority imposed from above'.¹³ Knowledge, as Foucault has insisted, is never stable and self-coherent and one discursive system does not simply reflect another.¹⁴ Instead I plan to locate 'the cultural narratives that grant [medicine] its authority'.¹⁵ I want to situate changing ideas on drunkenness prevalent in a wider social, religious and moral context and pinpoint political and economic formations within medical texts, on the one hand, and on the other, locate scattered expressions of 'medical' theory within broader terms of culture.

Belgian historiography, until very recently, has remained rather unaffected by ongoing historiographic discussions, in progress over the last twenty years in most other European countries.¹⁶ While critical reflection on the nature of the profession led the historical profession elsewhere to open up to innovative approaches, Belgian historians preserved an unflagging belief in their ability to reach the essence of an existing 'historical reality'. Profoundly influenced by the French Annales-School most Belgian historians showed, and often still continue to do so, a partiality to the recording, stratifying and classifying of data. Historical demography, surveys of wages and studies

segregation in Belgian society in the 19th century I recognized. 'Bourgeoisie' in this work therefore can include, what would be in the English equivalent, both 'upper-' as 'lower- middle classes'.

¹³ NYE, R. A. 'The evolution of the concept of medicalisation in the late 20th century.' *Journal of the History of Behavioral Sciences*. XXXIX, 2, 2003. 117

¹⁴ WOOD, J. *Passion and pathology in Victorian fiction*. Oxford. 2001. 6.

¹⁵ COVER, R. 'Nomos and narrative.' *Harvard Law Review*. XCVII, 1993.4-5.

¹⁶ SOLY, H. 'Geschiedenis in de jaren '80. Wetenschap of verhaal.' in VENCKELEN, T. & VERBEKE, W. eds. *Cultuurwetenschappen in beweging*. Leuven. 1992. 53.

on the standard of living of the working classes, sometimes mention alcohol consumption.¹⁷

Studying worker's budgets, Peter Scholliers, at the Free University of Brussels, concluded that workers could generally not afford the expense of excessive consumption of alcohol and that therefore the bourgeois commentators seriously overstated lower class drinking.¹⁸ The historical 'reality', as he had concluded from statistical research, did not 'correspond' with the image promoted by bourgeois doctors in medical temperance tracts. Those doctors as a hegemonic class, from Scholliers' neo-Marxist point of view, took the alcoholism of a few as an excuse to blame an entire class.

Quantitative research into alcohol consumption has been criticised by the Thomas Brennan, who does not believe that by analysing statistical evidence, often difficult to interpret, one can fully understand shifting patterns in drinking behaviour and the importance of the social role of alcohol. In fact, the specific symbolic values of drinking are not directly related to the actual qualities of alcohol consumed. Brennan called for a more 'ethnographic' approach, which would 'emphasise drinking as a culturally shaped experience.'¹⁹ Roy Porter agreed with Brennan and held that 'the cultural language of [people's] drinking habits remains almost wholly neglected by scholars.'²⁰ A history of

¹⁷ LIS, C. & SOLY, H. 'Food consumption in Antwerp between 1807 and 1859: a contribution to the standard of living debate.' *The Economic History Review*. XXX, 1977. 468-9. & SCHOLLIERS, P. *Arm en rijk aan tafel: tweehonderd jaar eetcultuur in België*. Berchem. 1993.

¹⁸ SCHOLLIERS, *Arm en rijk aan tafel: tweehonderd jaar eetcultuur in België*. 43-46. & SCHOLLIERS, P. 'Een vijand die men kennen moet'. *Jenever in België in de 19de en vroege 20e eeuw*. in VAN SCHOONENBERGHE, E. ed. *Jenever in de Lage Landen* Antwerpen. 1996. 138-157.

¹⁹ BRENNAN, T. 'Towards the cultural history of alcohol in France.' *Journal of Social History*. XXIII, 1, 1989. 71-92.

²⁰ PORTER, R. 'Introduction' in SOURNIA, J. C. *A history of alcoholism*. Oxford. 1990. ix.

the cultural meanings of drunkenness is new in Belgian historiography. Overall, Belgian historians only very recently and hesitantly took on cultural history as an analysis of representations, incorporating various types of sources.

Several students at Belgian universities choose the social problem of drunkenness in the nineteenth century as the subject of their dissertations. Those studies, very uneven in quality, mostly combined a quantitative approach with a description of the political, institutional and organizational aspects of the Belgian nineteenth century temperance movements.²¹ The student's work reflected the interests in social history as prevalent in their respective departments and illustrates a subsequent trend in Belgian historiography. Apart from collecting statistical data, Belgian social historians have mainly written the history of political, economical or religious institutions.²² In doing so, they 'failed utterly in procuring more than superficial insights in the material and mental world of the social groups they claim to be studying,' wrote Patricia Van den Eeckhout

²¹ WILLEMS, N. *La loi Vandervelde et ses antécédents*. Mémoire de Licence, Université Libre Bruxelles. 1971. & EXELMANS, F. *De lagere school en de strijd tegen het alcoholisme 1880-1914*. Licenciaatsverhandeling, Katholieke Universiteit Leuven. 1980. & CRISPEELS, Y. *De strijd tegen het drankmisbruik in België, eind 19e begin 20e eeuw*. Licenciaatsverhandeling, Katholieke Universiteit Leuven. 1982. & LOCKKAMPER, N. *Een situatieschets van de anti-alcoholische beweging in het laatste kwart van de 19e en het begin van de 20e eeuw*. Licenciaatsverhandeling, Vrije Universiteit Brussel. 1994. & DECLERCK, S. *Génèse du discours anti-alcoolique en Belgique 1830-1970*. Mémoire de Licence, Université Libre Bruxelles. 1994. & JORISSEN, M. *Ethiek ten dienste van de défense sociale: de stellingnamen van regering en parlement tegenover prostitutie, alcoholisme, landloperij en bedelarij. (1884-1894)* Licenciaatsverhandeling, Katholieke Universiteit Leuven. 1997. & MATKAVA, S. *L'Union des Femmes Belges contre l'Alcoolisme. 1899-1951: de la lutte antialcoolique aux militantisme féministe et pacifiste*. Mémoire de Licence, Université Libre Bruxelles. 1998. & CLAES, M. *'Il est impossible d'être féministe sans être antialcoolique': Marie Parent (1853-1935) een voorvechtster in de strijd tegen alcoholisme*. Licenciaatsverhandeling, Katholieke Universiteit Leuven. 2000.

²² an exception is the work of France Pirlot at the Université de Liège, who in addition thought about the social construction of drunkenness and the process of medicalisation related to it. PIRLOT, F. *L'alcoolisme en Belgique de 1830 à 1950. Mythe et réalité*. Mémoire de Licence, Université de Liège. 1993.

from the Brussels Free University in a critical article in 2000 about the state of affairs in Belgian social history.²³ In this article, Van den Eeckhout repeated an appeal for more theoretically innovative approaches within Belgian social history, which she had made already a few years earlier on a workshop titled *Tomorrow's social history* together with her Brussels colleague Peter Scholliers, who, interestingly, had been one of the first historians to address the subject of drunkenness.²⁴

Although Peter Scholliers still called himself a 'traditionalist social historian', in a more recent article on drunkenness, written after having expressed interest in other ways of doing social history, he moved away from statistical analysis of alcohol consumption and offered instead an overview of what he saw as the gradual influence of medical discourses on alcohol on high political debates and opinion-making related to it.²⁵ Based on both medical as well as government publications, Scholliers concluded that bourgeois doctors in insisting on picturing the drunkard as an 'ill' person rather than as a 'bad' person, reinforced not only their influence and prestige, but also contributed to a 'common sense' condemnation of excessive alcohol-drinking. The process of medicalisation of drinking was for Scholliers part of a wider project of the bourgeois to directly discipline working class behaviour.²⁶

²³ VAN DEN EECKHOUT, P. 'The quest for social history in Belgium (1848-1998).' *Archif für Sozialgeschichte*. XL, 2000. 329.

²⁴ VAN DEN EECKHOUT & SCHOLLIERS, 'Social history in Belgium: old habits and new perspectives.' 147-181. & VAN DEN EECKHOUT, 'The quest for social history in Belgium (1848-1998).' 321-636.

²⁵ VAN DEN EECKHOUT & SCHOLLIERS, 'Social history in Belgium: old habits and new perspectives.' 150.

²⁶ SCHOLLIERS, P. 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' in FENTON, A. ed. *Order and disorder: the health implications of eating and drinking in the nineteenth and twentieth centuries*. East Linton. 2000. 227-239.

In 2001, University of Leuven historian Liesbeth Nys summed up the deplorable state of affairs of Belgian history of medicine.²⁷ The few efforts being made in the field until then consisted mainly out of the production of first, institutional and descriptive accounts.²⁸ Nys concluded with a positive note on recent changing attitudes among Belgian historians. As part of a small group of historians interested in 'discourse analysis', she herself contributed to a volume on the history on medicalisation in Belgium and the Netherlands.²⁹ Nys wrote about medical discourses on degeneration and of alcohol and venereal disease in the army related to concerns of national efficiency.³⁰ She also researched the topic of absinthe in Belgium, condemned by a developing medical profession and by policy-makers, panicking about 'degeneration' while revered by bohemian cultures who interpreted drinking absinthe as a form of criticism and rebellion.³¹ Nys then, refreshingly, also addressed the social construction of the medical language about the three 'social scourges': 'tuberculosis, syphilis and alcoholism'.³²

²⁷ NYS, L. 'De metamorfose van Clio Medica. Evolutie en huidige stand van het medisch-historisch onderzoek.' *Mededelingenblad van de Belgische vereniging voor nieuwste geschiedenis*. XXIII, 1, 2001. 9-15.

²⁸ SONDERVORST, F. A. *Histoire de la médecine belge*. Zaventem. 1981. & VELLE, K. *De nieuwe biechtvaders: de sociale geschiedenis van de arts in België*. Leuven. 1991. & DE MAEYER, J., DHAENE, L. a.o. eds., *Er is leven voor de dood: tweehonderd jaar gezondheidszorg in Vlaanderen*. Kapellen, 1998.

²⁹ NYS, L., DE SMAELE, H. a.o. eds., *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen, 2002.

³⁰ NYS, L. "De grote school van de natie.' Legerartsen over drankmisbruik en geslachtsziekten in het Belgische leger.(ca.1850-1950)' *Bijdragen en mededelingen tot de geschiedenis der Nederlanden*. CXV, 2, 2000. 392-425.

³¹ NYS, L. "Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' *Tijdschrift voor sociale geschiedenis*. XXVII, 4, 2001. 411-436.

³² NYS, L. 'De ruiters van de Apocalyps. 'Alcoholisme, tuberculose, syphilis' en degeneratie in medisch België.1870-1940.' *Tijdschrift voor geschiedenis*. CXV, 1, 2002. 26-46. & NYS, L. 'Nationale plagen. Hygiënist over het maatschappelijk lichaam.' in NYS, L., DE SMAELE, H. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen. 2002. 220-241.

These articles were the first, serious evaluations of nineteenth century Belgian medical debates on alcoholism placed within a wider social context. They were republished in an inspiring volume of essays dedicated to the theme of degeneration in Belgium.³³

Both Scholliers as Nys have based their research mainly on medical writings about drunkenness, treating the process of medicalisation as an aspect of the development of bourgeois power. Within the medical and political discourses they studied, the experience of the alcoholic him or herself remained ignored. Furthermore, the importance of the specialization of psychiatry within the medicalisation of drunkenness was overlooked. The history of psychiatry in general in Belgium is, indeed, a field of study that is still almost completely unexplored.³⁴ A first contribution to it noted the importance of religious institutions within the founding of Belgium psychiatry.³⁵ Renée Stockman, brother of the religious order of the Brothers of Charity and founder of the Museum Guislain in Ghent has described the role of alienist Joseph Guislain in the development of the 'rise of modern psychiatry' in the first half of the nineteenth century.³⁶ In a recent overview on the history of psychiatry in Europe, Stockman shortly mentioned the growing presence of alcoholics in nineteenth century psychiatric

³³ TOLLEBEEK, J., VANPAEMEL, G., & WILS, K. eds., *Degeneratie in België 1860-1940: een geschiedenis van ideeën en praktijken*. Leuven, 2003.

³⁴ VAN WAESBERGHE, W. 'Het Belgische krankzinnigenbeleid in de XIXde eeuw.' *Annales de la société belge d'histoire des hôpitaux et de la santé publique*. XXII, 1984. 69-96.

³⁵ VANDERMEERSCH, P. ed., *Psychiatrie, godsdienst en gezag: de onstaansgeschiedenis van de psychiatrie in België als paradigma*. Leuven, 1984.

³⁶ STOCKMAN, R. *Neither rhyme nor reason: history of psychiatry*. Ghent. 1996.

hospitals, which he attributed to the rise of alcohol consumption in general in the same period.³⁷

Besides a historiographical conservatism and a significant paucity of secondary writings on cultural history, doing history in Belgium is also hampered by major problems surrounding primary sources and their preservation. Patricia Penn Hilden, an outsider American historian who wrote an excellent and original social history about Belgian working women in the nineteenth century, was so shocked and frustrated, that she felt compelled to devote a chapter in the introduction of her book to the 'dismal condition of the country's archives' in order to apologise for the voids in her research. She wrote about Belgian archives and libraries:

[...] during two German occupations important archives were destroyed. Natural disasters – fires and floods – have done equal damage, as have decades of human neglect. By comparison to equivalent French archives and libraries, to use only one European example, Belgium's repositories are virtually empty. Records are sparse, incomplete and dauntingly random. Hundreds of neatly labelled cartons in both national and provincial archives contain little material – and what there is, is often of little importance. Complete runs of local or national newspapers and journals are rare. [...] Hundreds of key government documents have evidently disappeared.³⁸

Information that some would deem essential for historical analysis is indeed almost impossible to find. Biographical details of doctors for example, often key players in the debates, were very hard to locate, apart from the sporadic obituary in a specialist

³⁷ STOCKMAN, R. *Van nar tot patiënt: een geschiedenis van de zorg voor geesteszieken*. Leuven. 2000. 83.

³⁸ HILDEN, P. *Women, work, and politics: Belgium, 1830-1914*. Oxford. 1993. 14.

periodical. Similarly, information about the life and the background of other authors of the texts I used – writers, politicians and artists – could often not be traced.

Such chaotic organisation of libraries, universities and archives in Belgium and the related difficulties for scholarship are the far-reaching consequences of a strong division in Belgian society along language and ideological lines as established in the nineteenth century, an organisation of society historians have called 'pillarisation'..³⁹ Even today, like so many things in Belgian society: saving, insuring, educating etc., the writing of history is done within linguistic and ideological frameworks. This means that there are French-speaking and Flemish-speaking places where documents are kept, and they are in their turn also politically divided. Therefore information related to the socialist history of Flanders would be in one 'socialist' archive in Ghent, while those related to the Catholic history of Flanders would be in a 'Catholic' archive in Leuven. When after 1968, Flemish became the official language at the University of Leuven in Flanders, a whole new campus was built, a few kilometres south of the 'language frontier', to house the French-speaking section and the university's library was, accordingly, simply split in two. Historians, linked to private archives associated with political movements or connected to politically inclined Flemish or Walloon universities, wrote mainly within the history of 'their movement'.⁴⁰ Even today this seems the predominant way social history is written. For example, when in 1999 a long expected work on gender and sexuality appeared, it mainly focussed on Flanders and on the socialist experience, as it

³⁹ BLOM, J. C. H. & LAMBERTS, E. *History of the Low Countries*. New York. 1998. 264.

⁴⁰ VAN DEN EECKHOUT, 'The quest for social history in Belgium (1848-1998).' 330.

was commissioned by the Flemish 'socialist' archive and composed of contributions from researchers sharing the same ideology.⁴¹

The problems of the practical and methodological aspect of researching and writing Belgian history become apparent at once. If only because drinking in the nineteenth century was neither uniquely Catholic, socialist or liberal, nor exclusively Flemish or French, I had to piece together sources from a multitude of places to allow for a somewhat broader overview of Belgian society. I like to think of this work as an indication of the exciting possibilities for cultural history in Belgium, merging Walloon and Flemish, and Catholic, liberal and socialist past experiences.

'Pragmatism, fact-orientedness and the descriptive treatment of social legislation, social relations and social conflicts largely overshadow the few attempts to link history and theory' concluded Patricia Van den Eeckhout's discussion of Belgian historiography. Therefore, if only to situate this thesis to some extent in a theoretical framework I had to find inspiration abroad. I was inspired by ways of looking at the past endorsed by the so called 'new cultural history' scholars in North America and Britain, who followed methods art historians and historians of popular media and cultural studies had already proposed to analyse visual representations. I also borrowed approaches advocated by literary theory, sociology and anthropology.⁴²

Marxist historians in Britain rejected the illusion of disinterested history and to understand how a certain past social order was structured stressed the importance of

⁴¹ DE WEERDT, D. ed., *Begeerte heeft ons aangeraakt: socialisten, sekse en seksualiteit*. Gent, 1999.

⁴² HUNT, L. & BIRSACK, A. *The new cultural history: essays*. Berkeley. 1989. & APPLEBY, J. O., HUNT, L. A. & JACOB, M. C. *Telling the truth about history*. New York. 1994. & ASHLEY, B. *Reading popular narrative: a source book*. London. 1997.

class as a crucial, social divide within society, considering it 'essentially a relationship'.⁴³ Accordingly, feminist historians, in their turn, questioned aspects of construction of gender-roles. Inspired by Michel Foucault, they concluded that sexual difference could no longer be considered as a biologically given fact but had to be seen as a cultural construct, historically specific and paramount in the organisation of society.⁴⁴ Cultural difference had become 'naturalised', the feminists said, taken for granted and not questioned. Therefore biological theory and ideas of 'nature' could be regarded as 'of prime importance in the definition of social roles.'⁴⁵ Difference is then explained as an expression of the construction of social identities that work by exclusion and according to binary structures deeply imbedded in language. These cultural dichotomies between e.g. normal and abnormal, civilised and savage, culture and nature, healthy and sick, men and women, lower and upper classes, and here, essentially, drunk and sober, work according to Ludmilla Jordanova at two levels: the use of separate terms highlights their difference, whilst pairing them evokes their kinship.⁴⁶ As Mary Poovey has pointed out, such systematic relations are also 'uneven'.⁴⁷ While some differences were stressed, other were hushed, in order to thereby 'discursively construct 'the other''.⁴⁸ This multiplicity of constructed differences can provide a deeper insight in that what Raymond Williams has

⁴³ THOMPSON, E. P. *The making of the English working class*. Harmondsworth. 1990. 8-13.

⁴⁴ e.g. SCOTT, J. W. 'Gender: a useful category of historical analysis.' *American Historical Review*. LXXXI, 1986. 1053.

⁴⁵ ROWOLD, K. *Gender and science: late nineteenth-century debates on the female mind and body*. Bristol. 1996. xxxv.

⁴⁶ JORDANOVA, L. J. *Languages of nature: critical essays on science and literature*. Brunswick, N.J. 1986. 34.

⁴⁷ POOVEY, M. *Uneven developments: the ideological work of gender in mid-Victorian England*. Chicago. 1988. 2.

⁴⁸ HALL, C. *White, male and middle-class: explorations in feminism and history*. Cambridge. 1992. 13.

called a 'structure of feeling': a particular way of life producing a distinct organisation.⁴⁹

On this premise, representations of drunkenness can allow access not only to what it meant in the nineteenth and early twentieth century to drink, to be drunk and to be addicted, but also 'offer insight in the historical processes that brought them about', into the organising systems underlying Belgian society at this particular historical moment.⁵⁰

When studying gender, class and drunkenness as cultural constructions, I approached my sources as 'representations' of reality. This approach invites criticism about the relationship of those representations with 'reality'. As a historian my allegiance is certainly with real past experiences, relationships and actions. Without question, alcohol effectively and physically affected the worker in the pub singing revolutionary songs; it had an impact on the health of the middle class lady that needed her pick-me-up everyday and contributed to the high spirits of her husband celebrating a promotion. But besides this, those individual's drinking also carried, necessarily, different cultural meanings. By acknowledging this, I take on what Catherine Hall has taught me: that the only access we have to the 'real' is through representations and that language constructs meaning, rather than reflecting it.⁵¹ When I ask questions about the construction of meaning and representations, I accept the premise that 'we think and act on the basis of

⁴⁹ WILLIAMS, R. *The long revolution*. London. 1961. 47.

⁵⁰ JACYNA, L. S. *Lost words: narratives of language and the brain, 1825-1926*. Princeton. 2000. 4-5.

⁵¹ HALL, *White, male and middle-class: explorations in feminism and history*. 24. & POOVEY, M. 'Reading history in literature: speculation and virtue in *Our Mutual Friend*.' in SMARR, J. L. ed. *Historical criticism and the challenge of theory*. Urbana. 1993. 44.

the resources our culture provide' and understand texts as cultural efforts 'deeply embedded in the social, economical and political order.'⁵²

Any text can give us 'the evidence of witnesses in spite of themselves' and beyond that, reveal the categories through which reality was perceived and uncover cultural frameworks 'given for granted.'⁵³ Texts in this sense then are all signifiers of a certain social structure, giving us insight into the network of associations within the language the 'writer' used and the 'reader' understood. As such, all texts reflect and contribute to a historical reality and popular songs and visual representations therefore can give away as much about the history of drunkenness as medical texts and contemporary statistics on consumption.⁵⁴ Carefully reading the texts against the grain and comparing them as representations, I would like to trace cultural meanings of drunkenness within the 'structure of feeling' of Belgian society at the end of the nineteenth century.

The place of drunkenness within complex cultural frameworks is never fixed and meanings are always shifting, they overlap and contradict. Shifts in meaning occur often in parallel with social change but possibly also reflect a conservative reaction. Contradictory concepts may be used side by side.⁵⁵ Drunkenness was constantly reshaped as different historical agents contributed to its meaning, negotiated and rethought it. I consciously use the term 'historical agents', because the next issue a cultural approach of this type faces up to is that of agency. It could be argued that, within a

⁵² BARNES, B. & SHAPIN, S. *Natural order: historical studies of scientific culture*. London. 1979. 138. & JORDANOVA, L. *Nature displayed: gender, science, and medicine, 1760-1820: essays*. London. 1999. 1.

⁵³ BLOCH, M. *The historian's craft*. Manchester. 1954. 61. & TOSH, J. *The pursuit of history*. New York. 1999. 183.

⁵⁴ POOVEY, 'Reading history in literature: speculation and virtue in *Our Mutual Friend*.' 45.

⁵⁵ CORFIELD, P. J. *Language, history and class*. Oxford. 1991. 27.

similar approach, the drunkard would find him- or herself defenceless in a web of language and meaning woven around him or her. Constructed and constrained, the drunkard then would become a mere product of culture and language, of a 'cultural superstructure'. But Judith Walkovitz had insisted that:

the fact that individuals do not fully author their texts does not falsify Marx's insight that men (and women) make their own history, albeit under circumstances they do not produce or fully control. The historian's task remains to explain cultural expressions in terms of 'historically situated authorial consciousness' and to track how historic figures mobilized existing cultural tools.⁵⁶

The drunkard actively participated in the negotiation of the place of his 'condition', as a problem or perhaps even as an experience that he or she believed to form part of the social universe he or she belonged to.⁵⁷ American sociologist Erving Goffman's idea of 'performance' proved very useful here, placing the drunkard's experience back into the wider network of cultural meanings, social conventions and 'common sense' attitudes and to understand how he or she was influenced by it and at the same time contributed to its construction.⁵⁸

A history of drunkenness within this theoretical framework and attributing historical importance to artistic representations, literature and art, has certainly been an 'unconventional' approach within Belgian historiography. After excavating primary

⁵⁶ WALKOWITZ, J. R. *City of dreadful delight: narratives of sexual danger in late-Victorian London*. Chicago. 1992. 9.

⁵⁷ FOUCAULT, M. *Abnormal: lectures at the Collège de France 1974-1975* London. 2003. 313.

⁵⁸ GOFFMAN, E. *The presentation of self in everyday life*. Woodstock, N.Y. 1973.

sources: government writings, medical tracts, countless novels, images and patient registers, collecting narratives of drunkenness, I interpreted my findings as Clifford Geertz had proposed: I needed to place the unearthed facts, or stories, within interdependent connections and map their relationships.⁵⁹ The final work offers an incomplete, broad overview of the place of different narratives of drunkenness, of stereotypes of 'the drunk' in culture and society. It is an unevenly contextualised study of many ways of looking at excessive drinking, resulting in diverse chapters that locate 'the drunk', in different places. Faced with a desert landscape of cultural history and secondary writing and a very irregular body of scattered primary material, within the scope of the thesis 'thick description' often remained inevitably just description.

A first chapter of this work follows the lead offered by the anthropologist Mary Douglas when she claimed that 'drink constructs the world.'⁶⁰ It aims to grasp the way in which drinking was represented as part of daily life in Belgium or as undesirable behaviour; how its social, political and ideological meaning was structured. Working class and bourgeois male and female identities were constructed through their respective approach and interpretation of drunkenness. Through the lens of drunkenness I try to comprehend the construction of social class – and always intertwined with it, that of gender and of ethnicity – in Belgium, within the narrative that gave it meaning, during the last half of nineteenth century and the beginning of the twentieth.⁶¹ Therefore, mainly based on the accounts of foreigners visiting or living in Belgium, I tried to reconstruct an outline of the complex and unique structure of Belgian society, focussing

⁵⁹ GEERTZ, C. 'Thick description. Towards an interpretation theory of culture.' in *The interpretation of cultures. Selected essays*. New York. 1973. 3-30.

⁶⁰ DOUGLAS, M. *Constructive drinking: perspectives on drink from anthropology*. Cambridge. 1987. 8.

⁶¹ JOYCE, P. *Democratic subjects: the self and the social in nineteenth-century England*. Cambridge. 1994. 1.

on the dynamics of drinking patterns. The chapter is divided in two different stories: one about 'the countryside' and another on 'the city'. In and through the differences between the countryside and the city, certain images and associations persisted in relationship with drunkenness, which will be described and analysed 'in their relation to the historically varied experience.'⁶²

With an analysis of political debates and the way different political ideologies – liberal, conservative Catholic and socialist – interpreted drunkenness, the thesis aims next to understand underlying preoccupations of the ruling political and economical elites related to drunkenness. Medicalised ideas and moral issues merged into the political debates on drunkenness, which was at the same time informed by fears of growing working class social and political demands. The arguments and discussions for or against legislation to curb what was perceived 'the growing plague of drunkenness', shows how political groups used drunkenness, as an attribute of 'the other', as a campaigning tool. The idea of a 'dangerous' and revolutionary alcoholic, morally deprived, but also biologically affected, was negotiated within debates on policy making.

Ideas of a 'dangerous' alcoholic, whose civil rights were to be subordinated to the greater good for society, permeated the medical discussions on alcoholism in the later part of the century. I want to discover how changes and differences within the medical discourse on alcohol during the fin-de-siècle transpired and aim to locate the mechanisms behind the medicalisation of a social problem. Like madness, drunkenness inhabited that space where the social met the medical and biological and where the battles over nurture and nature were fought. In Belgium, as in France, but unlike Britain, medical specialists

⁶² WILLIAMS, R. *The country and the city*. London. 1973. 1-2.

initiated the first temperance movements, incorporating and at the same time influencing contested and accepted ideas of drunkenness. I am interested in learning about the causes for drunkenness the doctors proposed and which solutions they wished for. Based on medical writings on alcoholism, I will demonstrate how different 'medical specialisations' became involved with the construction of drunkenness. I am specifically interested in the role set aside for alienists, specialists in mental disease, as specialists on drunkenness. This apparent role is not mentioned at all in the existing work on medical discourse on drunkenness in Belgium and I in this dissertation, I would like to show how psychiatrists and their notions of what insanity entailed proved essential in shaping notions of and possible solutions for 'normal' and 'abnormal' drunkenness.

Hence, at the centre of this thesis is a 'case study', based on admission documents and doctor's case notes of two mental hospitals in Ghent, one public and one private. Here I try to understand the involvement of psychiatrists with the care for alcoholics and the closely intertwined notions of madness and drunkenness, of normality and deviance. Admission registers and case notes provide once more another type of narrative representing the drunkard, and are a specific type of source revealing particular pitfalls, in need of its own critical assessment.⁶³ In the daily confrontation between doctor, drunkards and the nursing staff of religious brothers, ideas and practices merged. The outcomes of these dialogues provide complementing insights into the cultural structures of a stratified society at a moment of profound social change. In the daily confrontation between doctor and drunkard and in the practices within the asylum, popular, medical

⁶³ ANDREWS, J. 'Documents and sources. Case notes, case histories and the patient's experience of insanity at Gartnavel Royal Asylum, Glasgow, in the nineteenth century.' *Social History of Medicine*. XI, 2, 1998. 255-281.

and ideological and political ideas merged and 'science' became practice.⁶⁴ Drunkards, doctors and nurses were performing in the asylum within a dense cultural framework, in which drunkenness occupied a negotiable place. By labelling drunkards as 'mad' or 'bad', the psychiatrists contributed and were influenced by political and religious ideologies and so were the drunkards who came before them for scrutiny. I was the first ever to use those patient-registers and had, literally, to pick them from under the dust. I placed the case- study, which is the result of my work with the patient registers at the heart of the dissertation, as a model for the ways in which medical knowledge directly created different types of drunkenness, always in negotiation with the drunkard himself and his family. Aspects of class were always paramount in those interactions. Because the asylums in Ghent only housed male patients, I could not comment on the cultural category of gender within the doctor-patient relationship, but gender proved important when dealing with female family members of those kept in custody in the asylum.

The shifting 'constitution' of drunkenness, unexplainable and incurable, offered complications and contradictions to doctors and lawmakers concerned about exact definitions and inclusive demarcations to label 'deviance'. But the protean and unpredictable character of 'the drunkard' and his or her difficult reception in society inspired artists and novelists to create captivating characters in conflict-laden settings. 'The drunkard', someone who by his or her drinking behaviour had crossed social boundaries of tolerability, was invented in novels and frequently painted or drawn. The theme of drinking was equally prevalent in forms of 'popular' fiction like folk stories and songs.

⁶⁴ LUNBECK, E. *The psychiatric persuasion: knowledge, gender and power in modern America*. Princeton. 1994. 4.

While there is an impressive Belgian corpus of romantic and naturalist art and literature, only preliminary scholarship is devoted to it in Belgium.⁶⁵ Many of the artistic works I considered here have remained unknown and were not previously studied, certainly not by historians, as art and literature, the main resource for the last part of the dissertations, are in Belgium not generally acknowledged as a valuable historical source. The few historians who have used literature, have drawn on the fictional representations only as 'direct' examples of a 'real' reality.⁶⁶ It is certainly the case that literature can reflect a historical reality, indicating habits, customs and ways of thinking and interacting that were taken for granted. The simple fact that certain actions or facts were possible in a particular text within a certain context demonstrate this. The writer or visual artist, the 'teller' of the story, found inspiration in contemporary events and was steeped within in a historical reality, of which he or she offered representations. I have used fiction in this way throughout the thesis.

Nevertheless, using fictional representations as clear windows to reality will always be problematic. This becomes clear in, what I believe is a highly contentious way, in which the socialist historian Bart De Nil makes use of literature in his study of working class culture in the nineteenth century novels. In his interpretation, literature can offer a direct

⁶⁵ e.g. RUTTEN, M. & WISERBER, J. *Van 'Arm Vlaanderen' tot 'De voorstad groeit'. De opbloei van de Vlaamse literatuur van Teirlinck-Stijns tot L.P. Boon. 1888-1945.* Antwerpen. 1988. & LUC, A. F. *Le naturalisme belge.* Bruxelles. 1990. & TODTS, H., CARDIJN-OOMEN, D. & MONTENEYE, N. *Het volk ten voete uit. Naturalisme in België en Europa.* Gent. 1996.

⁶⁶ BROUWERS, B. *Literatuur en revolutie.* Meppel. 1971. & DE NIL, B. 'Cyriel Buysse en het bieftukken-socialisme: spiegel van de beeldvorming over socialisme en socialisten in de Vlaamse roman: een bericht over een lopend onderzoek.' *Brood en rozen.* II, 1996. & DE NIL, B. 'Het sublieme verschil. Tussen naturalisme en 'geslachtsdeelrealisme'. De Vlaamse sociaal-democratie en seksualiteit in de roman vòòr 1914.' in DE WEERDT, D. ed. *Begeerte heeft ons aangeraakt: socialisten, sekse en seksualiteit.* Gent. 1999. & DE BEUKELEER, K. *Traditionele volkse feestcultuur en modernisering. Het platteland rond Gent ca.1860-ca.1940.* Licenciaatsverhandeling, Universiteit Gent. 2001. 421-440.

insight to the real. But, being imaginary, in the notion of a hierarchy of historical sources he operates, literature finds itself at the bottom of this ranking, furthest removed from an objective reality existing 'out there'. 'Fortunately', De Nil wrote, 'we have the chance, through other sources, to check those images painted by novelist to the historical truth.'⁶⁷ On which more authoritative sources his claim for historical reality is based remains unclear. The aim of his study of literature is, De Nil explains, to compare the representations of working class habits as described in nineteenth century novels with 'reality', in order to find out to which degree the novels were 'real or myth.'⁶⁸ He concludes then that 'historical research has shown' that the way workers' behaviour was described in novels was 'incorrect'.⁶⁹

I disagree with this methodology and used in the third part of the work art and literature instead again as representations of reality, rather than a direct reflection of it. I have intended to loosely follow the approach proposed by Mary Poovey who made a case for historical research based on literature.⁷⁰

Considering artistic expressions as another 'text', carrying meanings about the structure of society, it is firstly important to understand the social position, not only of its author, but also of its audience. Fiction and art shares in the mental world of people who were supposed to read it or look at it. While the artist or writer created his work immersed

⁶⁷ DE NIL, 'Cyriel Buysse en het biefstuksocialisme: spiegel van de beeldvorming over socialisme en socialisten in de Vlaamse roman: een bericht over een lopend onderzoek.' 31.

⁶⁸DE NIL, 'Cyriel Buysse en het biefstuksocialisme: spiegel van de beeldvorming over socialisme en socialisten in de Vlaamse roman: een bericht over een lopend onderzoek.' 27.

⁶⁹ DE NIL, 'Het sublieme verschil. Tussen naturalisme en 'geslachtsdeelrealisme'. De Vlaamse sociaal-democratie en seksualiteit in de roman vòòr 1914.' 426 & 427.

⁷⁰ POOVEY, 'Reading history in literature: speculation and virtue in *Our Mutual Friend*.' 42-80.

within his own 'social character', revealing its meanings and values to the word, it was there, in its turn, publicly contested and reconstructed.⁷¹ After placing the 'text', its author and its audience in its historical background, the text should be repositioned 'in the historically specific discussions in which it participated'.⁷² In this thesis, the fictional representations of drunkenness are juxtaposed with the discussions of the subject that were taking place at that moment elsewhere in Belgian society, as elaborated in the first chapters.

Analysing the representation of the drunk in the work of different writers and artists, I want to locate how the figure of 'the drunk' circulated in wider culture.⁷³ I try to understand how different literary genres and artistic movements take on the image of the drunk. Furthermore, an analysis of artistic representations of drunkenness will illustrate the ways in which different artists and writers stress issues that also preoccupied the policy makers and the medical profession: themes of responsibility and free will, of biology or environment. I will link those accounts back to medical and political representations of drinking as analysed in former chapters. In a first section, I look at the Flemish literature and art related to the countryside. Then I ask the same questions to fictional representations of the drunkard in the city, but here I additionally focus on the complex formation of social class in literature. Drunkenness thus could become a degenerate working class mother's scourge, a middle class clerk's inner

⁷¹ MAZA, S. 'Stories in history: cultural narratives in recent works in European history.' *American Historical Review*. CI, 5 Dec., 1996. 1493- 1515. & KANE, A. 'Reconstructing culture in historical explanation: narratives as cultural structure and practice.' *History and Theory*. XXXIX, October, 2000. 314.

⁷² POOVEY, 'Reading history in literature: speculation and virtue in *Our Mutual Friend*.'47.

⁷³ SMALL, H. "In the guise of science'. Literature and the rhetoric of 19th century English psychiatry.' *History of the Human Sciences*. VII, Feb, 1994. 47.

conflict, a prostitute's obvious downfall, or a depraved dandy's perverted self-indulgence. Bearing the difficulties of conception and reception in mind, contemporary literature and art offers a vast field of culture in which to think about the position of drink in wider society. An analysis of such cultural expressions can help to locate the shifting boundaries between drunkenness as deviant and as 'acceptable' behaviour. It also can reveal the extent narratives on drunkenness travelled between medicine and broader cultural beliefs, how the categorization of drunkenness as an 'anomaly' by bourgeois doctors and law-makers, was accommodated in a much broader patchwork of culture.

I. Drinking in Belgium

To be always thirsty, everywhere, and under all circumstances, seems to be the national characteristic of the Belgian. For him every occasion justifies a drink: he drinks in the morning to awaken himself and to 'pull himself together,' before dinner to get up an appetite, and after dinner to aid digestion; after working hours to restore his energy, and before retiring to make him sleepy. He drinks on Saturday because it is payday, on Sunday because it is rest-day, and on Monday because it is the 'morrow of yesterday'. He drinks for consolation and for enjoyment, because his affairs go well, or because they go badly, because he has inherited from an uncle, or because an aunt has left him nothing.¹

The anthropologist Mary Douglas has identified three distinct ways in which drink constructs the world. In her eyes it can present the actual structure of social life. Indeed, just by the nature of the beverages that are believed fitting to be consumed, people identify themselves as belonging to a certain group within society. The finest example in Belgium in the nineteenth century, is the ideological division between wine and gin. Drinking, I would add, constructs culture also through the ways excessive drinking is assessed. As society defines itself in relationship with significant 'others', who necessarily need to be excluded, I try to understand the making of certain groups in

¹ From an address delivered by Baron R. du Sart de Bouland, Governor of the Provincial Council of Hainaut, at the opening of the session, July 7, 1903. as quoted in SEEBOHM ROWNTREE, B. *Land & labour: Lessons from Belgium*. London. 1911. 412.

society through their different opinions of when and how and especially for whom drinking became 'too much' and unacceptable.²

For Mary Douglas, drinking is secondly important in the construction of culture, because it constitutes an important economical force within society. The economical value and consequential political power of those involved in the brewing, distilling and drink trade was certainly of vital importance in the Belgian nineteenth century context. And lastly, she assesses drinking as being political and ideological: the ceremony of drinking constructs an ideal world. Drinking and celebration are always coupled and in Belgium in the nineteenth century, where society was divided along ideological lines and where politics cut deep into daily lives, it was always political.³

1. Drink and Belgian identities

According to the British alcohol-specialist, Norman Kerr, Belgian exhibited together with Denmark and Russia the 'greatest proportional extent of inebriety.'⁴ Foreigners visiting to Belgium recorded the 'otherness' they observed in Belgium and the widespread habit of excessive drinking was part of it. Mainly based on the descriptions of their experiences, complemented with images, stories and songs about drink in Belgium, I study the organisation of late nineteenth century and early twentieth century Belgian society, through the lens of drunkenness. From the constant habits of the countryside to

² COHEN, A. P. *The symbolic construction of community*. London. 1993. 12, 53 & 115 as quoted in LABRIE, A. *Zuiverheid en decadentie. Over de grenzen van de burgerlijke cultuur in West-Europa. 1870-1914*. Amsterdam. 2001. 106.

³ DOUGLAS, *Constructive drinking: perspectives on drink from anthropology*. 8.

⁴ KERR, N. 'Alcohol and drug habits.' in STEDMAN, T. L. ed. *Twentieth century practice: an international encyclopedia of modern medical science by leading authorities of Europe and America*. London. 1895. 126.

confusing and rapidly transforming city encounters, I want to understand how drinking constructed but also worked within cultural boundaries as a classed and gendered experience, and try to catch a glimpse of the establishing of limitations of it being acceptable or not longer condoned behaviour.

Foreigners who visited Belgium were always fascinated by the co-existing of two different 'races' in one country. The British visitor Cyril Scudamore, provided a 'racial' explanation for something, he explained, that was generally accepted: that in Flanders the amount of drinking was less than in Wallonie. 'Ignorance and crime' were, however, he knew, 'more conspicuous [in Flanders] than in other parts of Belgium.'⁵ Explanations put forward for this incongruity, had been that that the beer was of better quality in Flanders or that the Flemish farmers were simply too poor to get drunk on a regular basis, whereas their slightly wealthier counterparts in the industrial South could more readily afford to get drunk. But Scudamore thought there was more:

This may be so, but to my mind the radical character of the two races have much to do with these differences. The Flamand [sic] is gross, stolid and phlegmatic and prefers to get drunk (to use an Irishism, in a quiet and sober manner); the Walloon, on the other hand, is excitable and volatile and finds spirits more speedily exhilarating than ordinary beer.⁶

The racial differences observers keenly noted, can equally be interpreted as social differentiation. Getting drunk for the Flemish-speaking farmers in the countryside took place in a different social framework and brought about different connotations than

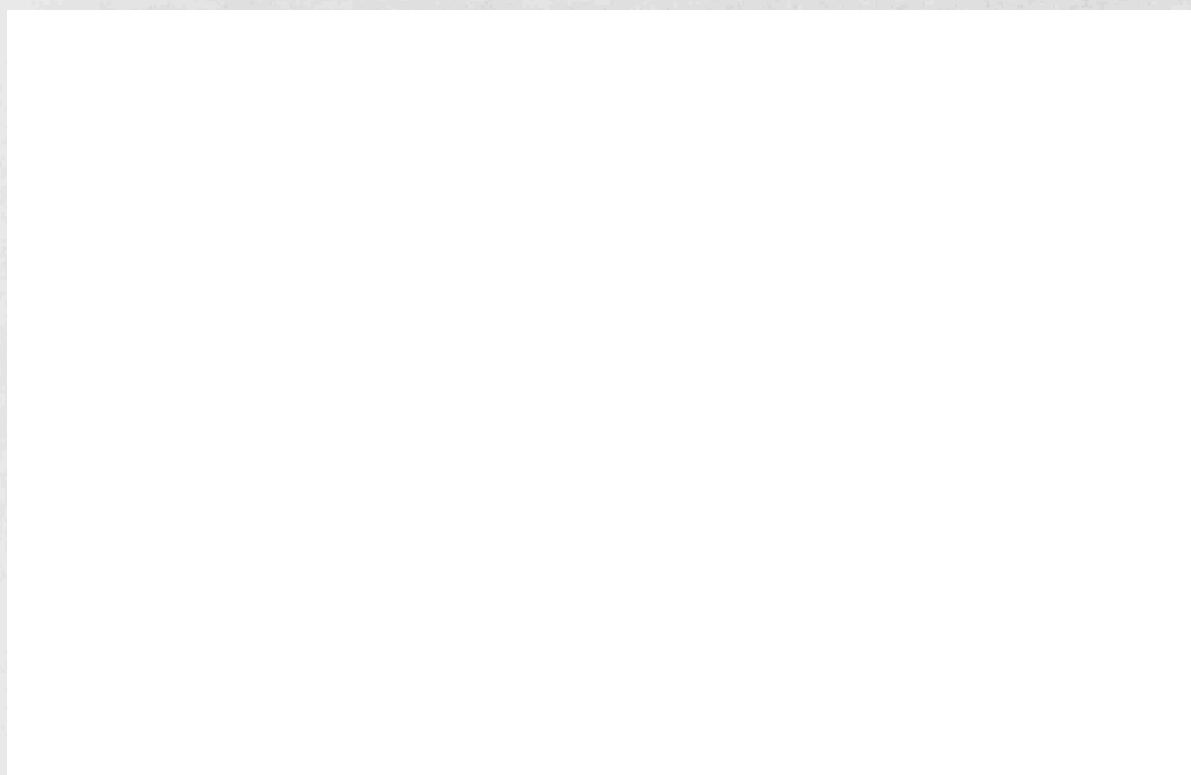
⁵ SCUDAMORE, C. *Belgium and the Belgians*. Edinburgh. 1901. 17.

⁶ SCUDAMORE, *Belgium and the Belgians*. 17.

when it occurred in the cities, with their more complicated and volatile social hierarchies, where exploited workers were living side by side with the bourgeoisie.

a. The countryside, a constant world

In the 16th century Pieter Brueghel famously painted scenes of festivities in the Flemish countryside. In his painting 'Kermesse with Procession and Theatre' many farmers are gathered to enjoy the special occasion with dance, food and a lot of drink.



1. PIETER BRUEGHEL II, *Kermesse avec Procession et Théâtre* s.d. Musées royaux des Beaux-Arts de Belgique, inv. 6870. Bruxelles

In Brueghel's paintings, the drinking leads to scenes of all kind of intemperance and 'bad manners'. Strong emotional encounters between the figures depicted in the Flemish countryside take place under the influence of drink. In this particular painting, Brueghel portrayed a multitudes of scenes of eating, drinking and dancing, but also a fight, a

couples kissing against the wall of an inn, farmers urinating against another wall and small children enjoying the drink as much as the adults who serve it to them. Since the middle ages authorities and elites tried to cut back on these events, kermises, of fairs, were considered rude and uncivilized. These regulations were almost always met with disregard or sometimes opposition. A proposed legislation to curb the amount of days of kermis by enlightened Austrian despot Joseph II had contributed to Belgian's own counter-revolution in the late eighteenth century.⁷

The Flemish countryside in the mid- nineteenth century was a landscape in which not much had changed since Brueghel's time. Segregated societies of smallholders and tenant farmers tried to make a subsistence living on their small plot of land sometimes inherited, but mostly rented from a landlord. By the end of the nineteenth century one third of the population in Flanders still 'lived of the soil'.⁸ Although much of the land was still in the hands of nobility and the local landlord was often a member of upper class, in the second half of the nineteenth century, he was frequently also a wealthy industrial, who had taken over the lands and country-houses formerly belonging to the nobility. The landlord was regularly also the mayor of the town or local Member of Parliament.⁹ The tenant farmer's position was always precarious, dependent of the whims of the proprietors and on environmental factors. In the mid-nineteenth century, the Flemish countryside was only just recuperating from a devastating famine caused by a disease of the potato -crop, the farmer's staple diet. One English visitor wrote:

⁷ BLOM a.o., *History of the Low Countries*. 232-233.

⁸ VAN ISACKER, K. *Mijn land in de kering: 1830-1980*. Antwerpen. 1978. 225.

⁹ BLOK, D. P. *Algemene geschiedenis der Nederlanden*. Haarlem. 1981. vol XII, 93. & DE WINNE, A. *Door arm Vlaanderen*. Leuven. 2001.105-106.

The conditions of life among the agricultural classes of Flanders would be considered intolerably hard by the agricultural labourer in England, and even the sense of possessing the land on which they toil would not atone for them. The Flemish peasant, or proprietor labours all day, and his day is the long one from sunrise until well after sunset.[...] But it is not only the men, but also the women who work thus. There are, of course, household duties and work at home to be performed; but these do not prevent the women and girls from toiling in the fields as well.[...] Their education is practically nothing at all, but they are sound Catholics, and it is not thought to be to the interest of the Church, or the party that claims that designation, that they should progress in worldly knowledge.¹⁰

At the bottom of the rural society one encountered indeed a large group of farmhands, often seasonal workers who offered their services to various tenant farmers or one or a few wealthier gentleman-farmers of the village.¹¹ Those last formed part of a small group of wealthier and more educated citizens who peopled the Flemish villages apart from the majority of poor farmers and the landlord, called by writer Cyriel Buysse 'the dignitaries' of the village. The notary as the intermediate person between the landlord and his farmers was part of this venerated club in the village and other members could be the doctor – although there was not a doctor of every village – and a local rich entrepreneur, often the brewer. Further key elites in the village were the schoolteacher and most importantly the priest. The church stayed at the centre of village life, literally and certainly symbolically and what the priest preached in the pulpit on Sundays was law: religion dominated life in the nineteenth century Flemish countryside.

¹⁰ BOULGER, D. *Belgian life in town and country*. London. 1904. 96-97.

¹¹ DE WINNE, *Door arm Vlaanderen*. 106.

‘What I used to think about as the fancies of the imagination of some painters,’ wrote Charles Baudelaire referring to paintings like those of Brueghel, ‘is in fact a representation of the customs.’¹² Having moved to Brussels in an attempt to evade his creditors, while he himself was hopelessly lost in drink and drugs, Baudelaire viciously attacked all aspects of Belgian habits and customs. In his feverish notes he expressed more than once his outrage about ‘the terrible drunkenness among the people’ of his guest country he had become to hate.¹³

The fair or kermis was indeed still the highlights of the farmer’s calendar, a high point in his otherwise bleak life of hard labour on the land. Farmers and their families would unwind at those feasts in their own and neighbouring villages, celebrated mostly in September, after the intense work of the harvest. And, as in Brueghel’s time, processions, devoted to the Virgin Mary or a locally worshipped saint, often accompanied the kermis while the traveling theatre still entertained with coarse burlesques. Towards the end of the centuries other entertainments were added to the celebrations, like archery contests or a cycling race. Drink and becoming drunk were essential cultural features on the kermis, when farmers felt allowed to let go and feel free.

Emigrated farmers who worked as workers in neighbouring cities would return to their old villages for days of overindulgence of food and drink.¹⁴ Many youths in the nineteenth century had left the ungrateful work on the land, that seemed to hold no future, to take on jobs in neighbouring towns, commuting daily or weekly. Many were

¹² BAUDELAIRE, C. *Arm België*. Amsterdam. 1975. 122. Throughout this work the translations from French and Flemish are mine, unless an English translation already existed.

¹³ BAUDELAIRE, *Arm België*. 32.

¹⁴ DE WINNE, *Door arm Vlaanderen*. 125.

also attracted to the farms and factories of the North of France, were there were working opportunities not existing in Flanders.¹⁵ Those who stayed closer to home often took on new seasonal employment opportunities that arose for example in brick-making factories, to complement their farming income.¹⁶ Brick making became notorious for the drinking habits that accompanied it and many sources represented the extremely hard work of the brick making yards, far away from home, as linked to a rough lifestyle of which excessive drinking formed part.¹⁷

The director of a brick factory of Boom '[where] alcohol causes so much devastation' nonetheless, was nevertheless satisfied of his employees, who, in accordance with the stereotype of their Flemish race, meekly put up with the hard work in calm resignation.¹⁸

He told the *Commission du Travail* in 1886:

I can only testify of the good spirit and the honesty of the worker of the Campine. He knows to obey and to subject himself to the sacrifices his good judgement recognises as inevitable. Alcohol and the excitement of mental brains [des cerveaux mentales] seldom override the calmness of his reflections.¹⁹

¹⁵ WOESTENBORGH, B. 'Les travailleurs saisonniers flamands en France de 1870 à 1970.' in MORELLI, A. ed. *Histoire des étrangers et de l'immigration en Belgique de la préhistoire à nos jours*. Bruxelles. 1992. 205-212. & BLOK, *Algemene geschiedenis der Nederlanden*. vol XIII, 287.

¹⁶ HÉLIN, É. 'Reconstituer l'histoire des 'bricteurs' saisonniers.' in MORELLI, A. ed. *Histoire des étrangers et de l'immigration en Belgique de la préhistoire à nos jours*. Bruxelles. 1992. 213-228.

¹⁷ e.g. DE WINNE, *Door arm Vlaanderen*. 48. BUYSE, C. 'De biezenstekker' (1894) in *Verzameld werk*, IV, Brussel, 1974.658. & BUYSE, C. 'Het recht van de sterkste' (1893) in *Verzameld werk*, I, Brussel, 1974.64.

¹⁸ *Bulletin de la société médicale belge de tempérance (B.S.M.B.T.)* Avril 1902.363.

¹⁹ COMMISSION DU TRAVAIL institué par arrêté royal du 15 avril 1886 volume II *Procès verbaux des séances d'enquêtes concernant le travail industriel*. Bruxelles. 45. 713.

The kermis with its drunkenness was a moment of dissonance, where the farmers felt for once they were sanctioned to subvert the traditional order of things. Writer Cyriel Buysse again, illustrated this, when he describes how during the kermis the drinking farmers recited 'Our Lord's Prayer of the Drunkard'. This mock prayer repeated the formulas of the 'official' prayer, known by all, but in this version parts of the text were replaced by references to drinking and getting drunk. 'Our lord, who is in all public houses,' prayed the farmers with much laughter, 'holy is the bitter and the gin.'²⁰

The excited drunkenness of the kermises, was always denounced by the elite. It was seen as gratuitous and the fever of the event filled the bourgeoisie with fear. Calls for regulation of kermises were still heard throughout the nineteenth century. According to many morality campaigners – the clergy but also medical authorities – excessive drinking at these occasions too often lead to 'scenes of barbarity': sexual promiscuity, fighting and violence.²¹ Since the celebration of kermis was mainly widespread in Flanders, one can sense a ground of bigotry in the words of French diplomat Henri Chariaut, when he wrote:

When he is glugged with food and gin, the Fleming, dominated by his brutal instinct, shows the need to become rowdy to affirm his force with great scenes. It is rare that a Sunday passes by without there having been, a 'red kermis' in one or another village. ²²

²⁰ BUYASSE, C. 'Guustje en Zieneken' (1887) in *Verzameld werk*, IV, Brussel, 1974.47.

²¹ PIRSON, E. *L' alcoolisme à la campagne*. Louvain. 1903. 11. & B.S.M.B.T. avril 1902. 365. & sept 1905 395.

²² CHARRIAUT, H. *La Belgique moderne. Une terre d'expériences*. Paris. 1910. 17.

Some Belgian fin-de-siècle writers like the poet Emile Verhaeren or Georges Eekhoud, used the celebration of the kermis as a main theme in their work. The drunkenness, the festive atmosphere, which allowed for social conventions to be thrown overboard, sanctioned poetry that celebrated strong emotions of which violence was a central sentiment. 'With rage and with distress... the kermis grinds' [*avec colère, avec détresse [...]* *moud la kermesse.*] Verhaeren's famous poem commenced.²³ In George Eekhoud's work, the tension between his characters was solved in extreme violence or sexual excesses. The kermis and its drunken brawls provided ideal backgrounds for his radical plots.²⁴

Apart from the celebration at the kermis, drink accompanied all important moments in life. Beer was so integral to the way of life that it had become considered, even among the bourgeoisie as a 'necessary element for the entertainment of the masses'.²⁵ But not only the masses drunk much and often. Also for the upper classes themselves, for the 'nobility' of the village alcohol was an important element in sociability.

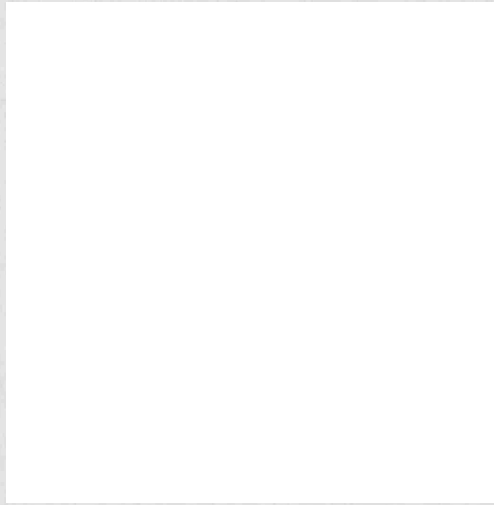
Both in lower or upper classes alcohol whether in the shape of beer, 'jenever', wine or other liquors accompanied the people's life from the cradle to the grave. In the Flemish countryside, after the church ceremony of a christening, godparents of the child bought drinks for the midwife, friends and neighbours in the local bar, the 'cabaret', while the mother stayed home recovering. Midwives were often represented as drinking too much, and there were plenty of anecdotes of midwives forgetting the baby or holding it upside

²³ VERHAEREN, E. *Les campagnes hallucinées. Les villes tentaculaires*. Paris. 1982. 59.

²⁴ EEKHOUD, G. *Kermesses*. Bruxelles. 1884. & EEKHOUD, G. *Nouvelles Kermesses. Moeurs Flamandes*. Bruxelles. 1887.

²⁵ BOËNS, H. *La bière au point de vue médical, hygiénique et social*. Bruxelles. 1878. 145.

down, or the father introducing the newborn for the first time with liquor during the celebrations of the christening.²⁶



2. Vaderlandschen bond tegen alchoolism. *Almanak der matigheid*. Brussel, 1910.

Another important date, which according to all the evidence was accompanied with much drinking, was the day of the drawing of lots for the military conscription. From the French period onwards, it was decided by drawing of lots who was to be enlisted for a year of obligatory military service. Whereas rich young men who drew a bad lot mostly sold theirs for money to a substitute, for the poor 18-year old this was not an option. When he drew a bad lot he had to enter the service, which was often disastrous for himself and his family, as he could not help on the farm. It was custom that, when going for the draw one was to get drunk in his town.²⁷ When a good number was drawn, festivities and drinking would go on for days, when the outcome was a bad number, the future soldier and his family drank to forget their problems a moment. The celebrations

²⁶ Regnier christens his cousin's daughter with champagne in LEMONNIER, C. *La fin des bourgeois*. Bruxelles. 1986. 97.

²⁷ BUYSSE, C. 'Uleken' (1926) in *Verzameld werk*, III, Brussel, 1974. 606

or frustrations of the appointment of the military service by lot were also a sort of passage rite for young men into adulthood. From this day onwards he was allowed to visit bars, dance and find girlfriends and have an adult opinion. The *Bulletin de la société médicale belge de tempérance* called the scenes in the 'cabarets' on days of drawing lots 'orgies by a delirious mass'²⁸.

Drinking was unavoidable on wedding days. After the civil marriage, the groom could invite the company, the witnesses and the civil servant who conducted the ceremony to gin for the men and 'anis or menthe liquors' for the women.²⁹ Next, after the church service, the family, friends and neighbour were invited for gin and beer. The married couple then would go to town, to drink and when they returned the neighbours would have organised a party with more drink which could go on until deep into the night, with no sober soul left.³⁰

At the end of life, drink was equally important. When a person died it was the custom that neighbours came to the house of the deceased for a wake. Plenty of gin and coffee were consumed as they were deemed indispensable to stay awake. Regularly those night wakes were represented as turning into a drinking spree.³¹ After the funeral ceremony, again it was traditional to drink with the bereaved family in the town cabaret, and while

²⁸ B.S.M.B.T. Nov, 1908. 424.

²⁹ BUYASSE, 'Het recht van de sterkste'. 49.

³⁰ STREUVELS, S. *The Long Road*. Boston. 1976. 83-84. & BUYASSE, C. 'Het leven van Rozeke van Dalen' (1906) in *Verzameld werk*, II, Brussel, 1974. 67. & BUYASSE, 'Het recht van de sterkste'. 55.

³¹ BUYASSE, C. 'Op het kleine gehucht.' (1901) in *Verzameld werk*, IV, Brussel, 1974. 884-891. & BUYASSE, 'Het recht van de sterkste'. 143-145.

reminiscing on memories of the life of the diseased, friends and family member would easily get drunk.³²

Without necessarily getting drunk, a portion of alcohol was always needed to add weight to an event. The sale of cattle was settled with a glass of gin for example and the owner of a newly built house had to offer a dram to the builders when the roof went on it.³³ Drinking was also an important way to show hospitality: 'borrels' or 'dreupels': a little glass of gin or a pint of beer were offered to visitors.³⁴ The English social researcher Seebohm Rowntree was shocked to find out that everywhere he came to call in Belgium, hospitality was offered in the shape of a glass of liquor, 'no matter what the time of day may be, even if it is eight o'clock in the morning.'³⁵ When the neighbours welcomed a family in a new home, they would offer the new inhabitants gin to celebrate.³⁶ Most weekdays, families would not go to the cabaret, but stay in, come together to play cards, with a glass of beer or gin or just to 'buurten' to chat and to tell stories.

Belgium had a record number of bars and whereas the greatest concentrations were to be found back in the industrial towns in the south there were also plenty of pubs in rural Flanders. For example in the town of Calmthout in the very poor region of the Campine,

³² LEMONNIER, C. *La vie Belge*. Paris. 1905.105.

³³ Jenevermuseum Hasselt

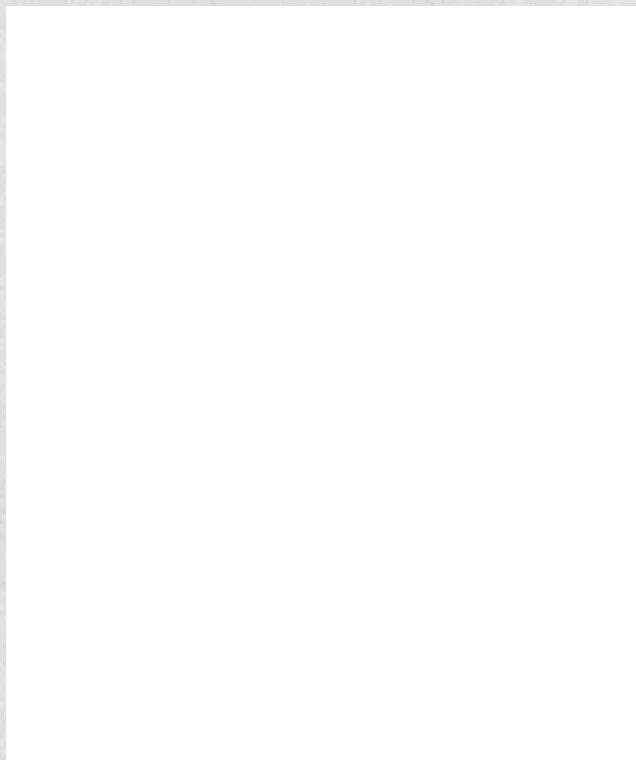
³⁴ BUYSE, C. 'Het erfdeel van Onkel Baptiste' (1885) in *Verzameld werk*, IV, Brussel, 1974. 3. & BUYSE, 'Guustje en Zieneken'. 41.

³⁵ SEEBOHM ROWNTREE, B. *Land & Labour: Lessons from Belgium*. London. 1911. 412.

³⁶ DE BEUKELEER, *Traditionele volkse feestcultuur en modernisering. Het platteland rond Gent ca.1860-ca.1940*.

http://home.planetinternet.be/~sintlod9/volkscultuur/volkscultuur_deel_3_hfst_6_tot_10.htm#8.%20DORPSLEVEN & BUYSE, 'Het leven van Rozeke van Dalen'. 95-105. & VAN ISACKER, *Mijn land in de kering: 1830-1980*. 53.

which counted 3901 inhabitants, or 693 households, there were 112 cabarets. All along the main road stretching through the village were bars; one drinking place for every four houses.³⁷ The rural tavern, was a place where the village community felt at home. It served gin and beer, often home-brewed. Gin was served in small glasses 'borrels ' or 'dreupels' (drips) and beer came in large pitchers.³⁸



3. PROSPER DE WIT, *Kempens café-interieur*. 1903. Nationaal Jenevermuseum. Hasselt.

The village tavern was the principal meeting place, where men exchanged news and where gossip was told in the evening or on Sunday before and after the mass. Sometimes a literate person in the town read the newspaper out loud to the illiterate farmers, who could be found side by side with the country gentleman who believed it his duty to go a

³⁷ VANDERVELDE, E. *Le parti ouvrier et l'alcool*. Bruxelles. 1898. 5.

³⁸ VAN ISACKER, *Mijn land in de kering: 1830-1980*. 52.

few times a week in the evening.³⁹ It would, however, not be respectable for 'village dignitaries', to get drunk with the farmers, and partake in their pastimes like sack races and bowls.⁴⁰



4. LEON FREDERIC, *Sunday before mass*. 1906. Museum voor Schone Kunsten. Gent.

After the mass the farmers would return to the bar and drink a few beers or 'borrels' more, many would get drunk, others would go home after only a few beers to play cards with friends.⁴¹ Some would attend meetings of one or another society to which they belonged. The centre of society life in a village took place in the pubs, where the society's meetings were held, some pubs bearing the name of the society. The local brass band for example practised in the room upstairs or adjacent to the pub⁴². Members of the society of longbow archery, a very popular pastime, would quench their thirst in their pub,

³⁹ DE BEUKELEER, *Traditionele volkse feestcultuur en modernisering. Het platteland rond Gent ca.1860-ca.1940*. & BUYASSE, C. 'Sursum corda' (1894) in *Verzameld werk*, I, Brussel, 1974.166. & BUYASSE, C. 'Het volle leven' (1908) in *Verzameld werk*, II, Brussel, 1974. 531.

⁴⁰ BUYASSE, 'Sursum corda'. 283.

⁴¹ DE WINNE, *Door arm Vlaanderen*. 109.

⁴² BUYASSE, C. 'Repetitie-avond' (1911) in *Verzameld werk*, V, Brussel, 1979.100.

while cycling and football clubs, drama and music clubs, pigeon fanciers, would all meet and drink in local bars.⁴³

Drinking on special occasions, drinking on Sundays after mass with the fellow members of a society and consequently getting drunk was common. Drunken behaviour at these occasions was to be expected; it was accepted and acceptable behaviour in the village community, although criticism and comment was often heard, mostly by bourgeois commentators. During the week, however, the farmers were sober: drinking excessively on 'ordinary' days was not customary behaviour but also out of necessity, concluded Peter Scholliers. Drink was simply too expensive to consume daily in large quantities.⁴⁴ When those farmhands emigrated to the towns to work as labourers, however, alcohol would become an affordable item and it was easy to fall for its attraction.⁴⁵

The vulnerable system of subservience with its roots in the 'ancien régime' in the Belgian countryside entailed a constant threat to the farmer's livelihood. Unable to pay the high fees to the landlord as a result of natural adversity or economical crises, the farmer would often have no other choice left than to give up their rented cottage and lands.⁴⁶ In desperation, consolation was sometimes found in the bottle. But demonstrating repeated extremely drunken behaviour, outside the acceptable framework of celebrations and festivities when drunkenness and excess were given free rein, was not readily accepted and it brought shame over the individual. The importance of the respectability of the

⁴³ BUYSSE, C. 'De grootste kooi' (1911) in *Verzameld werk*, V, Brussel, 1979. 121.

⁴⁴ SCHOLLIERS, "Een vijand die men kennen moet". Jenever in België in de 19de en vroege 20e eeuw.' 155.

⁴⁵ VANDERVELDE, E. *Essais socialistes: l'alcoolisme, la religion, l'art*. Paris. 1906. 79.

⁴⁶ DUMONT, G. H. *La vie quotidienne en Belgique sous le règne de Léopold II. (1865-1909)* Bruxelles. 1996. 82-83. & BLOK, *Algemene geschiedenis der Nederlanden*. vol XII, 100-101. & BUYSSE, C. 'Het gezin van Paemel' (1902) in *Verzameld werk*, VI, Brussel, 1979. 789.

family was very prominent in Flemish rural communities and in a small village a drinking problem would be extremely difficult to hide, and a 'drunk' would be a well-known, scorned figure.

b. The city, a changing world

The high speed of industrial cities was a world away from the steady life in the villages. Belgian cities and industrial centres presented more complicated hierarchies, more social confrontations and clashes than the tranquil countryside. Textile industry, heavy metal works and coalmines had provided Belgium's extraordinary wealth, which would rank the country before 1900 within the hierarchy of industrial powers second with the USA, to be topped only by great Britain.⁴⁷

Migration from the countryside meant that the industrial centres mostly in the French speaking South drastically expanded, but also the population of the one large industrial centre in Flanders, Ghent, mushroomed: it tripled over the course of the nineteenth century. The Belgian industry owed its economical success partly to the fact that the worker's wages were kept extremely low. In the beginning of the 20th century, Belgian workers were 'among the most miserable of Europe'⁴⁸, earning a third to half less than the British, while their working hours were 10 to 20 % higher.⁴⁹ In the mines and metal factories, women were working alongside men as they had done in the countryside. In

⁴⁷ RIOUX, J. P. *La révolution industrielle, 1780-1880*. Paris. 1971. 101.

⁴⁸ HOBBSBAWM, E. J. *The age of empire, 1875-1914*. London. 1994. 99.

⁴⁹ REYNEBEAU, M. *Een geschiedenis van België*. Tielt. 2003. 149.

1866, for example, women represented 62% of the workforce in the textile industry in Ghent and Belgium was the only country where women were doing underground work in the mines.⁵⁰

When the British traveller Demetrius Boulger visited one of the industrial centres in the South of Belgium, he was appalled:

A visit to the Borinage is not a pleasant experience. [...] To the proprietors, with rare exceptions, the miners are mere beasts of burden, in whom they do not affect to feel the least interest.⁵¹

Working and living conditions of the exploited working class were indeed in sharp contrast with the self-indulgent existence of the industrialists, who generally had remained indifferent to their role in the plight of the working classes. Most agreed, as did Boulger himself, that the first cause of the worker's miserable condition lay in their inert debased character, worsened through their excessive drinking:

Ignorance and immorality explain the low condition to which the mining population has sunk, but even those causes would not have produced so appalling a result if they had not been supplemented and aided by the prevalence of drunkenness. [...] The only amusement known to these people is to

⁵⁰ GUBIN, E. 'Home Sweet Home.' L'image de la femme au foyer en Belgique et au Canada avant 1914.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. XXII, 3-4, 1991.534. & HILDEN, P. 'The rhetoric and iconography of reform: women coal miners in Belgium, 1840-1914.' *The Historical Journal*. XXXIV, 2, 1991. 411-436.

⁵¹ BOULGER, *Belgian life in town and country*. 96-97.

drink and to get drunk. There are no abstainers or half abstainers among them.

The only distinction lies between beer-drinkers and spirit-drinkers.⁵²

The inhabitants of the cities, man and women, rich and poor, were obliged to share its space. Bourgeois observers complained relentlessly about the annoying presence of unruly and drunk lower class people, who were to be found now literally on their doorsteps. Unlike the almost completely segregated reality of the countryside where the family of the bourgeois landlord in its country-house would only glimpse the farmers far away working in the fields, and sometimes drink a polite glass in a respectable pub in the village, in the city there was no avoiding the confrontation with 'how the other half lived'. From the side of the bourgeoisie, this encounter generated fears, intolerance, and resulted in moralising efforts to change the ways of the workers. Artist James Ensor caught this feeling entirely in an ironic print called: *Plague under, Plague over, Plague all around* from 1904.

⁵² BOULGER, *Belgian life in town and country*. 75-76.

5. JAMES ENSOR, *Peste dessous, Peste dessus, peste partout!* 1904. Civica Raccolta Stampe A.Bertarelli. Milano.

It depicts an apprehensive bourgeois couple surrounded by lower class people who, in their eyes – or, better, noses – spread an awful smell.⁵³ One trusted way for the bourgeoisie to keep the boundaries clear between themselves and the lower orders had always been the idea of cleanliness, implied by orderly appearance.⁵⁴ In Ensor's print a bourgeois couple is surrounded by badly smelling lower class individuals. The lady is clean, and simply but elegantly dressed and she wears a hat, while next to her sits a woman, who is dressed in a dishevelled way with a dirty apron suggesting her working class status. Her hair falls untidily over her forehead. The bourgeois lady looks

⁵³ Untraceable in our sources, it goes without saying that smell had a very important influence for social relationships. The smell of alcohol in one's breath for example, would trigger a whole array of cultural associations and conclusions. About smell see CORBIN, A. *Le miasme et la jonquille: l'odorat et l'imaginaire social XVIIIe-XIXe siècles*. Paris. 1982.

⁵⁴ LABRIE, *Zuiverheid en decadentie. Over de grenzen van de burgerlijke cultuur in West-Europa. 1870-1914*. 89.

perturbed at the woman of dubious reputation next to her. With a little bottle of liquor in her hand and flushed cheeks and a inebriated, dazed look, the lower class woman is clearly drunk and she threatens to fall over, towards the lady. The clouds of smell that Ensor drew in the air over the scene convey the idea of contamination. In the cities, the smells of the unclean, drunken masses entered, like a miasma, into the clean life sphere of the wealthy.

Those city-bourgeois who praised cleanliness, insisted on respectable dress and fervently condemned lower class drunkenness, were not necessarily the haute-bourgeoisie – the traditional elites – those old wealthy families that had been at the basis of Belgium's economical success, and who had merged with and had almost supplanted the waning aristocracy. Instead, they represent a growing urban bourgeoisie of educated professionals: academics, doctors and lawyers, called by Georges-Henri Dumont, based on economical grounds, the *moyenne bourgeoisie*.⁵⁵ It was among this group that concerns about the drinking habits of the lower classes were first voiced and that the first temperance organisations were set. It was their system of values, of reform liberalism, that would provide the dominant voice in the discourse on alcoholism in the second half of the nineteenth century.

Also central to the life in the city, occupying the shifting ground between proletariat and bourgeoisie, was a large but quiet lower middle class, known as 'petit bourgeoisie', which was much taken for granted and often disregarded by contemporaries and consequently by historians. The capitalist enterprise was kept running by the paperwork of countless clerks, and essential to the social and economical interactions in

⁵⁵ DUMONT, G. H. *La vie quotidienne en Belgique sous le règne de Léopold II (1865-1909)*. Bruxelles. 1996. 74.

the city were small shopkeepers and their wives. Furthermore there were artisans like cobblers and printers, proud of their trade. These middle classes, whose boundaries were difficult to define, had in common that they were self-consciously different from a higher, 'consuming class'. They would for instance criticize those of their own class who would 'drink champagne on other occasions than at family dinners.'⁵⁶ They presented themselves as respectable and productive, an attitude without space for drunkenness. At the same time the middle classes fought a tenacious struggle to establish themselves as 'respectable' and different from the large crowds of working class people, perceived as badly educated, loud and heavy drinking.⁵⁷ Offices had strict rules and regulations to control the behaviour of their employees, which included articles on the consumption of alcohol. For example, article 6 of one such *règlement de bureaux* read:

It is prohibited to speak during office hours. An employee who smokes cigarettes, takes alcoholic drinks, and frequents billiard rooms or political environments [*milieux politiques*] is considered dubious as for his honour, his honesty and his accuracy.⁵⁸

In Flanders, the *petite-bourgeoisie* would speak Flemish but aiming to speak a standardised, 'official' version of it, unlike the working classes who spoke the local dialect.⁵⁹ It was important for this middle class to distinguish itself from the lower

⁵⁶ LILAR, S. *Une enfance gantoise*. Paris. 1976. 15. & KURGAN - VAN HENTENRYK, G. 'Une classe oubliée: la petite bourgeoisie de 1850 à 1914.' in JAUMAIN, S. & KURGAN - VAN HENTENRYK, G. eds. *Aux frontières des classes moyennes: la petite bourgeoisie belge avant 1914*. Bruxelles. 1992. 19.

⁵⁷ JAUMAIN, S. 'Les petits commerçants et la frontière entre petite bourgeoisie et classe ouvrière (1880-1914).' in JAUMAIN, S. & KURGAN - VAN HENTENRYK, G. eds. *Aux frontières des classes moyennes: la petite bourgeoisie belge avant 1914*. Bruxelles. 1992. 106-107.

⁵⁸ as quoted in DUMONT, *La vie quotidienne en Belgique sous le règne de Léopold II (1865-1909)*. 79.

⁵⁹ see also III Drink in fiction. 1. in the countryside. p. 250.

classes through behaviour and performance, because financially, their situation as wage-earners could be as precarious. And so, even if they liked to call themselves bourgeois, even though *petite*, the petite-bourgeois has been referred to as *prolétariat en redingote*. (proletariat in frock-coat).⁶⁰ Therefore, while the petite-bourgeoisie could not afford to travel second class in trains, for example, they felt very uncomfortable having to share a compartment with members of the class beneath them. In third class, someone complained: 'one comes in contact with drunkards, with dishevelled people without any education, who make vulgar comments in the presence of young children and who smoke, sing and spit.'⁶¹

Also in the 'estaminets' where men from artisan or middle class backgrounds came to read their newspaper, to play cards or to chat about politics behind a glass of local beer like *Faro* or *Gueuze*, unambiguous efforts were made to distinguish these drinking places from the rowdy and noisy bars the workers frequented. Camille Lemonnier wrote how those 'quiet sanctuaries, well stocked with bourgeois clients, enemies of noise, enforce a ban on singing. An infraction to this rule will result in an invitation to leave.'⁶²

Language, class and therefore drinking habits went hand in hand in Belgium.⁶³ Whereas French diplomat Henri Charriaute did not have a good word to say about the Flemish way of life and the people's apparent love of drinking, he was much more positive about the racial nature of the Walloons: he found them 'more enthusiastic and more generous'.

⁶⁰ DUMONT, *La vie quotidienne en Belgique sous le règne de Léopold II (1865-1909)*. 75.

⁶¹ JAUMAIN, 'Les petits commerçants et la frontière entre petite bourgeoisie et classe ouvrière (1880-1914)'. 107.

⁶² LEMONNIER, *La vie Belge*. 107.

⁶³ ZOLBERG, A. 'The making of Flemings and Walloons: Belgium 1830-1914.' *Journal of Interdisciplinary History*. V, 1974.

One has to realise, however, that the 'striking contrast' he noticed was not based on racial features or situated 'within the origins and the heredity' as he called it, but based on class differences.⁶⁴ The workers in the pubs drank beer and gin and spoke Flemish, whereas the people Chariautte was introduced to during his stay in Belgium as a diplomat, were French speaking Belgians, who usually drank wine. 'The Flemish, do not have the same appreciation for good wines, as the Walloons' Charriaute observed. In fact, of course, the Flemings were unable to afford the pricey French wines at 2 francs for half a litre *Bordeaux*.⁶⁵

The wine the bourgeois in the cities would get drunk on, carried with it completely different cultural connotations than the beer and the gin the ordinary people drunk. The Belgian haute-bourgeoisie preferred wine, as it was an essentially French drink and they liked to see themselves associated with everything French. The French writer Théophile Gautier who travelled to Belgium described how the waiter in his up-market hotel refused to serve him the local beer he was curious to try, as it was considered too low. 'What have I done to receive such a humiliation' cried the hotel manager, who was called in to attend the problematic customer, 'is my hotel not according to the latest taste of Paris and London?' ⁶⁶ Wine was certainly considered more 'civilized' than beer. But although the French-speaking bourgeois did its utmost best to show off with costly French wines, according to acid Charles Baudelaire, they were just pretending; the Belgian love for wine was a fraud, he believed and full wine cellars were nothing but status symbols: 'They [the Belgian bourgeois] drink wine out of vanity, not because they

⁶⁴ CHARRIAUT, *La Belgique moderne. Une terre d'expériences*. 19.

⁶⁵ BAEDEKER, K. *Belgium and Holland: Handbook for Travellers*. London. 1885. xxi.

⁶⁶ GAUTIER, T. *Un tour en Belgique et en Hollande*. Paris. 1997. 117.

like it. If they could show it to you without having to drink it, they would be very pleased.⁶⁷

The British immigrant Lalla Vandervelde, the English wife of the socialist leader Emile, similarly noticed such superficiality among the Belgian bourgeoisie, who she noted 'care chiefly for eating and drinking'.⁶⁸ The Belgian bourgeoisie was certainly notorious for its extravagant eating and drinking habits. They liked to show off their wealth with lavish banquets.⁶⁹ In Ghent in 1876, at the wedding of Benjamin Ingels, the medical superintendent of the public mental asylum *Hospice Guislain* more than 10 courses were served, all combined with different matching wines: with the oysters came *Souterne*, with the turbot and the foie-gras champagne, while burgundy accompanied the venison filet. In between courses a sorbet was served based on cherry liquor and after that followed pheasant with *St. Julien*, 'buisson' of lobster with *Hochheimer* and finally desert of orange fruit salad with Rhine wine.

But, unlike the working classes and the farmers' drinking habits, alcohol was part of the lifestyle of the bourgeois, even on ordinary days. Apart from wine with the meals, the taking of aperitifs before and of digestives after meals in the shape of all kinds of fashionable liquors, like *vermouth-cassis*, *picon-curacao*, *bitter-citron*, was a widespread habit.⁷⁰ Very few temperance writers commented on the double standards or perhaps the false beliefs related to the type of drink that was drunk and the impact it had on one's

⁶⁷ BAUDELAIRE, *Arm België*. 32.

⁶⁸ VANDERVELDE, L. *Monarchs and Millionaires*. s.l. 1925. 21.

⁶⁹ VLOEBERG, S. *Tot we barsten. Een impressie van het banket in de 19e eeuw in drie Belgische steden: Leuven, Mechelen en Diest*. Licenciaatsverhandeling, Katholieke Universiteit Leuven. 1991.

⁷⁰ *Le globe illustré: journal de la famille*. XXX, 27 Avril 1890.

health. Anti-alcohol campaigner Juliaan Melchior, who revealed his progressive and popularising stance by writing in Flemish, was a rare voice who pointed out that 'many clerks, bourgeois and wealthy people do admit that gin is a poison, but they believe that fine liquors [...] can be beneficial for one's health because they are [...] expensive and unadulterated.'⁷¹

Habitual drunkenness as a result of a bourgeois extravagant lifestyle was something people did not like to talk or write about. The decadence of lavish drinking parties, the taking of aperitifs and digestives might have been an accepted practice, but from the moment a person was known to have 'taken to drink', he or she was an embarrassment for the family, a black spot that preferably was not mentioned. The reputation of the bourgeois family of the painter James Ensor, for example, was seriously damaged by his father's alcoholism. For his son, who always respected his father, a cultured man, it was the shallow life of the Belgian bourgeois circles that had led him towards his addiction. He blamed the unavoidable drinking culture among the men of the bourgeois class for his father's problems: 'the bourgeois used to enjoy getting him drunk; we have suffered greatly for it.'⁷² Ensor's father was ridiculed for his drunkenness and his family with it. An outcast in society, he would die from his alcoholism, destitute on the street when he was just fifty-two.

But the bourgeoisie did not drink exclusively at home. The cities boasted also plenty of cafés where the higher bourgeoisie gathered. Towards the end of the century, sumptuous cafés had interiors like real palaces, with mirrors, paintings and gilded

⁷¹ MELCHIOR, J. *De jeneverplaag, of het alcoholisme in België*. Hasselt. 1896. 85. & *Het volksgeluk* 9 sept 1911, 69.

⁷² LESKO, D. *James Ensor, the creative years*. 1985. 18.

decoration, like the luxurious *Café du Phare* in Liège: a magnificent building, opened with much pomp in 1886. The interior was lavishly decorated with wall paintings and there was an enormous billiard room, which had twenty tables.⁷³

At the other end of the social scale one could find countless modest workers' bars. Here, in contrast to the upmarket cafés and the middle class estaminets where it was explicitly forbidden, an entertaining evening was not complete without singing. In Ghent, the workers of the textile factories sang along with performers like Karel Waeri who accompanied them on his violin. Alcohol and drunkenness feature often in the songs performed in bars. Some songs Waeri performed were true eulogies on the virtues of drinking, always celebrating the drinking of beer, but never gin or wine. 'I don't like the drink of Spain, that wine which one drinks with water, I don't feel at all like champagne, that drink heats up the blood too fast,' he sang, 'I drink with much pleasure the double beer of Ghent.'⁷⁴ These lyrics affirmed the singer's working class and national identity: as worker he was proud of the local beer he could afford. Camaraderie whilst getting drunk was central in these songs in which Waeri stressed the need to forget worries: 'we won't bother when one says, the times are bad, we prefer to drown that complaint in our glass, until the landlord wants his debts', the visitors of the Ghent pubs sung at the top of their voices. 'Happiness was in the glass' and 'drink makes hurt and pains disappear'

⁷³ ANKAERT, R. 'Les cabaretiers-caféiers à la fin du XIXe siècle.' in JAUMAIN, S. & KURGAN - VAN HENTENRYK, G. eds. *Aux frontières des classes moyennes: la petite bourgeoisie-belge avant 1914*. Bruxelles. 1992.31. 7. & *Le globe illustré: journal de la famille*. L, 11 Sept. 1887.

⁷⁴ 'Het dubbel bier' in WAERI, P. *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. Gent. 1899. 291.

were the overall themes of the songs.⁷⁵ For the workers, getting drunk in their cabarets, drink was a way to construct an ideal world.⁷⁶ 'Since we cannot show off with a velvet hat, we drink in our clogs, it tastes equally good,' sang the cotton labourers in their estaminets.⁷⁷ Re-affirming the class differences: on more favourable terms, the drinking of the workers worried the bourgeoisie.

It was certainly the case that habitual drunkenness and alcoholism could become serious problems and many families had to undergo its dismal effects.⁷⁸ The ready availability of cheap gin did not help. Whereas in 1810 each inhabitant of the country had consumed 5.8 litre of gin per year, in the years 1805-1870 this had risen to 9.5 litre, and consumption would stay at this high level until 1900.⁷⁹ Contemporary sources communicated alarmed that the Belgians had the highest consumption of gin in Europe and that they consumed almost twice as much as the English.⁸⁰

But for the working classes in the cities, as in the countryside, the pub was the centre of social life and often the only entertainment available.⁸¹ Historian Renée Laboutte asserts that in the industrial regions of Wallonie, where the socialist movement found its

⁷⁵ 'Het Glas' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 357.

⁷⁶ DOUGLAS, *Constructive drinking: perspectives on drink from anthropology*. 8.

⁷⁷ 'Dranklied' in WAERI, P. *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen "Beranger"*, Gent, 1899. 257.

⁷⁸ See further Part II. Drunkenness and the doctors. 2. In practice: the alcoholic population of the Ghent asylums. pp. 175 - 245.

⁷⁹ SCHOLLIERS, 'Een vijand die men kennen moet'. Jenever in België in de 19de en vroege 20e eeuw.'152.

⁸⁰ *Bulletin de la société médical belge de tempérance*. sept 1898, 352. planche V. & SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 528.

⁸¹ HAINE, W. S. *The World of the Paris cafe: sociability among the French working class, 1789-1914*. Baltimore. 1999.

adherents, the bar slowly replaced the church as the place for sociability since 1880.⁸²

English visitor Demetrius Boulger wrote of the mining districts of Belgium:

There are no clubs, except the circles of the Socialists, and the only places of resort are the estaminets and cabarets that are to be found in practically every third and fourth house.⁸³

In industrial centres the concentration of bars was certainly impressive. Most observers agreed that the state of affairs of unlicensed and unlimited alcohol sales could only encourage drinking habits.⁸⁴ Some determined defenders of free enterprise, however, concluded that the situation was 'not so bad as statistics might lead us to infer.' English commentator Cyril Scudamore, explained how often powerful brewers would buy up all the small houses,

which they let to the workman at a low rent on the condition that they retail their beer alone. In this way it becomes the interest of an artisan to sell beer, even if he does not drink it himself, as by this means he secures a cheap house in a place where it might otherwise be hard to obtain one at all.

This seemingly unfair monopolising of property by brewers for their own interests had according to Scudamore in fact 'a rather beneficial effect in lessening the evils of intemperance.' Before, when there had been only one or two pubs in the town, the workers would crowd together and 'encouraging one another to drink'. Now that there

⁸² LEBOUTTE, R. 'A propos de la condition ouvrière en Wallonie, fin 18e - 19e siècle.' in BRUWIER, M., CAULIER-MATHY, N. a.o. eds. 1886, *la Wallonie née de la grève? Colloque organisé à l'université de Liège les 29 octobre, 14 et 29 novembre 1986*. Bruxelles. 1990. 22.

⁸³ BOULGER, *Belgian life in town and country*. 96-97.

⁸⁴ *Annales Parlementaires*, Chambre, Séance du 19 juillet 1887. 1660.

were so many different places to buy a beer, 'the men [...] only meet in groups of two or three, and avoiding undue excess, depart quietly home to bed.'⁸⁵

The pub was the main place where men met and gathered and therefore encompassed many more social functions than just drinking and getting drunk together. Similarly to the countryside, in the cities too, societies would meet in pubs. In the absence of government provisions for workers' relief, saving funds and societies for mutual relief often had their seat in the local pub.⁸⁶ The political, cultural and social function of the pub has been repeatedly noted in the case of France and Britain.⁸⁷ In Belgium it had an equally, strong ideological function, perhaps even more pronounced, because politics in Belgium started at the basic level of social gathering. In a country extremely divided along ideological lines, it was unimaginable that a member of a family known as Catholic would visit a drinking place frequented by socialists, just as much as it was unconceivable that the son of a socialist family would for example play music with a Catholic brass band.⁸⁸ Social researcher Seehbohm Rowntree explained the unique phenomenon, of 'pillarisation' to British readers:

A fact with Belgian party politics which strikes an outsider is the deep cleavage which they carry into the whole social structure. [...] There is extraordinary little

⁸⁵ SCUDAMORE, *Belgium and the Belgians*. 17.

⁸⁶ B.S.M.B.T. nov. 1908. 421.

⁸⁷ BRENNAN, 'Towards the cultural history of alcohol in France.' & PRESTWICH, P. E. *Drink and the politics of social reform: antialcoholism in France since 1870*. Palo Alto. 1988. & NOURRISSON, *Le buveur du XIXe siècle*. & BARROWS, S. 'After the Commune. Alcoholism, Temperance and Literature in the Early Third Republic.' in MERRIMAN, J. M. ed. *Consciousness and class experience in nineteenth-century Europe*. New York. 1979. & HAINE, *The World of the Paris cafe: sociability among the French working class, 1789-1914*. & GOLBY, J. M. & PURDUE, A. W. *The civilisation of the crowd. Popular culture in Britain 1750-1900*. London. 1999. 119.

⁸⁸ BLOM a.o., *History of the Low Countries*. 252-307.

social intercourse between Catholics and Liberals, and particularly none between Catholics and Socialists. Politics enter into almost every phase of social activity and philanthropic effort, and it is the exception rather than the rule, for persons holding different political opinions to co-operate in any other matter. Thus, in one town there will be a Catholic, a Liberal and a Socialist trade union, a Catholic, a Liberal and a Socialist co-operative bakery, a Catholic, a Liberal and a Socialist thrift society all catering for similar people, but each confining its attentions to members of its own political party. The separation extends to cafés, gymnasia, choral, temperance and literary societies, indeed, it cuts right through life.⁸⁹

This division of an entire society according to ideological lines could partly explain the multitude of drinking places in Belgian. Politics, social life and therefore the pub were always very closely linked and one can easily conclude that in Belgium people drunk not mainly according to social class, but also in line with political ideology.

Alcohol was, however, not only served in cafés and pubs, but most grocery shops also served gin and many private shopkeepers supplied gin and other liquors to possibly thirsty customers. Théophile Gautier on his travels remarked in his journal: 'In Vallencienne I saw for the first time on the wall that formidable description, which is reproduced invariably every 10 houses, until the end of this marvellous odyssey: *Verkoopt men dranken* This means in true Flemish 'Here drink for sale'.⁹⁰ A picture taken in Antwerp in 1894 of an antiques shop reveals that 60 years later not much has changed.

⁸⁹ SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 24.

⁹⁰ GAUTIER, *Un tour en Belgique et en Hollande*. 48.

Next to the sign with the name of the owner of the shop, one can perceive a smaller sign announcing that apart from antiques the shop also sells drinks and 'fine liquors'.⁹¹

Most of this drink would be sold by women who often supplemented their husband's factory earnings with the income from a modest bar in the front-room of their house.

Again Seehbohm Rowntree explained:

To keep a *cabaret* means to take a house somewhat larger than would otherwise be taken and to devote the front room to the sale of drink. During the day the wife is occupied with her household duties and only comes into the *cabaret* proper when she hears a customer had arrived. ⁹²

Morality campaigners fumed against those modest bars run by women, because of the confusion they felt they engendered about social space. While it was acceptable for women to work underground, wearing trousers and doing men's work in the mines, at home, they were wives and mothers. By making the privacy of their homes public, presiding over the male drinkers of the quarter in their bar, women would cast glimpses of their private world into the public. 'It is there' appalled opponents wrote about the cabaret, 'that mothers, without any shame, give the breast to newborns.'⁹³

Such a muddling up of boundaries between the public and private sphere made it difficult for women running a pub to maintain their respectability, certainly in the eyes of the bourgeois observers but also within her own class. In one folksong, one working class women insulted another by calling her 'ye old barmaid': a woman behind a pub

⁹¹ VAN ISACKER, *Mijn land in de kering: 1830-1980*.223.

⁹² SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 413.

⁹³ B.S.M.B.T. nov 1908, 422.

counter, was easily seen as a less respectable member of the working class community.⁹⁴ Towards the latter part of the century, in the cities, in new spaces of drink and entertainment like vaudeville theatres, *café-cabaret* or *café-chantants*, working women became ubiquitous: there were female waitresses and also singers and dancers. The presence of female bar workers evoked assumptions of prostitution and in a number of infamous pubs, the barmaids would sometimes indeed offer more to the customers than just drink.⁹⁵ Overall, the girl in the pub, exposed to the male sexual gaze was seen as 'available' and became easy victims of sexual harassment.⁹⁶ Therefore it was very important for female workers in drinking places to safeguard their respectability, while approaching male visitors and potential suitors. More than one self-respecting female character working in bars in Buysse's oeuvre insisted on 'good intentions' from admirers and a prospect of marriage.⁹⁷

Penny Penn Hilden argued that because the situation of the Belgian working class women was extraordinary in that they did generally the same factory and mining jobs as men, they consequently also drank together with the men in the pub. But sources different from the anti-alcohol writings, like fictional representations, present an image of female drinking habits that is much more ambiguous. The evidence rather seems to

⁹⁴ 'De Mosselkaai' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 333-336.

⁹⁵ DE WEERDT, D. *Ongewenst sexueel gedrag op de werkplek in het 19e eeuwse België*. Leuven, 1990, 45.

⁹⁶ HERMAN, S. 'De grenzen van seksueel geweld. Schuld en schande in Vlaanderen tijdens de 19e eeuw.' *Tijdschrift voor sociale geschiedenis*. XXVIII, 1, 2002. 63.

⁹⁷ In *Het Bolleken* Eleken was clear about Vital's advances: 'this was as far he was allowed to go, not further'. BUYSSE, C. 'Het bolleken' (1905) in *Verzameld werk*, II, Brussel, 1974. 391. Sidonie in *Het Volle Leven* told her suitor Odon clearly: 'It cannot last like this any longer, its one thing or the other.' BUYSSE, 'Het volle leven'. 542.

lead to a conclusion more similar to the case Patricia Prestwich has made for the French situation. Prestwich contended that although many bars were presided over by a woman behind the counter, the clientèle would be predominately male and female presence in ordinary bars at weekdays would be irregular.⁹⁸

Some foreign visitors, however, noted the alleged extent of female drinking in Belgium and Henri Charriaute was shocked to see that Belgian women accompanied their husbands to the cabaret.⁹⁹ Working class and petit bourgeois women certainly would accompany their husbands on days of *fête* or on Sundays, when the whole family would go for an excursion to a restaurant or tavern out of the city to eat waffles and to dance and women would join in with a glass. On special occasions, equally, women would drink sweet liquors, with the men, to celebrate. When a baby was born to the lower class wife of wealthy Mr. Vital in Buysse's *Het Bolleken* and champagne-corks popped, she felt she could have a glass herself and her mother and the midwife decidedly agreed, despite the fact that the doctor strongly opposed the idea.¹⁰⁰ And although no self-respecting bourgeois wife wanted to be seen in a café, for women from the broad *petite-bourgeoisie*, the situation would also change towards the First World War. In the beginning of the new century for them 'to enter in a café was not a complete ignominy.'¹⁰¹

⁹⁸ PRESTWICH, P. E. 'Female alcoholism in Paris, 1870-1920. The response of psychiatrists and families.' *History of Psychiatry*. XIV, 3, 2003. 221-236.

⁹⁹ CHARRIAUT, H. *La Belgique moderne. Une terre d'expériences*. 1914. 210.

¹⁰⁰ BUYASSE, 'Het bolleken'. 424.

¹⁰¹ LILAR, *Une enfance gantoise*. 38.

Lynda Nead has argued how the differentiation of women between 'the fallen' and the 'virtuous' depended on sustaining visible differences between them.¹⁰² Therefore some caf  s found it necessary to set rules to differentiate between 'respectable' and 'not-respectable' women. In the famous caf   *Milles Collines* in Brussels, the admission of women was only tolerated if they were accompanied from their husbands and if they were wearing a hat.¹⁰³ Such rules were obviously very easily corrupted and confusion about identity would certainly occur.¹⁰⁴ The only and ultimate way then, to delineate between respectable and non-respectable behaviour was the attitude towards drinking. Respectable women from all classes would not like to be seen drunk in public. This principle was not necessarily directly influenced by the anti alcohol discourse or the message of the hygienists of what was the appropriate place of a woman, but rather discouraged by the application of social control within women's own circle. The idea of what the neighbours thought was all-important, also in working class neighbourhoods and a woman from the same street being drunk in public, would certainly not be lightly forgotten.

Drunkenness was explained in a multitude of ways. Foreign visitors to Belgium noted the extend of drunkenness on the Belgian streets, other contemporary writings added to their reports how in Belgium the working, middle and upper classes looked upon drinking and experienced drunkenness and in this way drinking habits not only reflect but also constructed Belgian society. The boundaries of drunkenness as accepted behaviour were located within complex social structures that were always shifting. The

¹⁰² NEAD, L. *Myths of sexuality: representations of women in Victorian Britain*. Oxford. 1988. 180

¹⁰³ ANKAERT, 'Les cabaretiers-caf  tiers    la fin du XIXe si  cle.' 31

¹⁰⁴ WALKOWITZ, *City of dreadful delight: narratives of sexual danger in late-Victorian London*. 50-52.

moment when drunkenness crossed the line of acceptability and became problematic and 'deviant' behaviour, depended on how the drunkenness was experienced, by society and by the drinker him-or herself.

2. Drink and revolution: the politics of drink

Alcohol, both its consumption and its production, has been the subject of political debate in Belgium. As Roger Chartier has argued, in neo-Marxist fashion, rival representations – in this case of drunkenness – can be just as important as economic struggles for understanding the mechanisms by means of which a group imposes (or attempts to impose) its conception of the social world, its values and its dominion.¹ Drinking and getting drunk carried ideological meanings which the different political factions, the conservative Catholics, the Liberals and later the Socialists took on. Their different outlooks on the issue became rhetorical tools to fight ever more hostile political battles.

a. Laissez faire, laissez buver: 1850-1886

Nevertheless, especially compared with neighbouring countries like England and Holland, Belgian governments were extremely reluctant to address the subject and unwilling to regulate both consumption and production of alcohol.² The bourgeois vision of society – the gospel of freedom, free trade and a mentality of individualism and positivist liberalism preached by liberal leaders such as Walthère Frère-Orban, who would become prime minister twice – reflected the interests of the very restricted electorate. A system of franchise based on taxes meant that, before 1893, less than 1 in 4 adult males could cast a vote. The economical miracle of Belgium, called by Marx a 'paradise of continental liberalism', was brought about by a few exceedingly rich entrepreneurs, at the expense of a large class of exploited farmers and industrial

¹ CHARTIER, R. *Cultural history: between practices and representations*. Ithaca, N.Y. 1988. 5.

² GREENAWAY, J. R. *Drink and British politics since 1830: a study in policy making*. Basingstoke. 2003. 196.

workers. Such deep social inequalities made mid-nineteenth century Belgium a state where class segregation ruled and bourgeois opinion-makers justified their view by representing the working class as morally, culturally and socially inferior.³

The problem of excessive drinking was only addressed laterally before the second half of the century by political thinkers when they were forced to reflect about possible reasons and solutions for the problem of poverty, provoked by the so-called 'crisis of the Flanders'. In 1848 severe potato famines had led thousands of Flemish farmers to devastation and many travelled to the industrial centres to find alternative employment. The Belgian reaction to the social revolutions elsewhere was surprisingly restrained considering the economical turmoil and the crisis of the Flanders. And even if in 1848 it still seemed unthinkable that docile Belgian farmers and workers would follow the example of their foreign partners in adversity, the Belgian liberal bourgeoisie now sensed for the first time discomfort, when they read in the newspapers about the upheavals in Paris and the rest of Europe.⁴ Karl Marx, who had found a safe haven in Brussels to author the *Communist Manifesto* with Frederick Engels, after being banished from Paris, was now asked to leave the Belgian capital as well, and the rate for franchise, was slightly lowered, so that a larger section of the 'lower' bourgeoisie could be added to the electorate.

The unsettling question of socialism, however, was not yet raised when Catholic social reformer Edouard Ducpétiaux contemplated the problem of poverty in 1850. His answer

³ DUMONT, *La vie quotidienne en Belgique sous le règne de Léopold II. (1865-1909)* 99.

⁴ BLOM a.o., *History of the Low Countries*. 255.

to the crisis combined notions of Malthusianism and Christianity.⁵ The farmers and workers would, he maintained, be able to struggle their way out of destitution through education and the promotion of moral and religious feelings, but never by granting them economical support or higher wages.⁶ Sobriety was one important aspect of this exercise in self-control. Following up on his initial work on poverty, Ducpétiaux published in 1855 a survey of wages and consumption: *Budgets économiques des classes ouvrières en Belgique*, in which he distinguished two different sorts of workers. Some were sober, hardworking and honest, but the majority, he alleged, lived immoral and irregular lives in self-afflicted poverty. As a rule these workers would spend their wages on drink and debauchery. Increasing wages therefore could not be a solution and the existence and survival of sober workers proved that wages were sufficient.⁷ Drinking and drunkenness was 'one of the dominant vices of the worker, transmitted unremittingly from fathers to children', that could and should be remedied with moral solutions.⁸

Ducpétiaux' influential views on poverty and crime led to reforms in poor relief and of the penal system in Belgium. In 1866, he promoted a law that was consequently passed in parliament 'on the repression of vagrancy and beggary'. It would enable the state, for the first time, to arrest people in the street often under the influence of drink, when they could not show evidence of any wealth or status. Many problem-drinkers were accordingly after arrest sent to special mendacity depots or 'agricultural colonies.'

⁵ DUCPÉTIAUX, E. *Mémoire sur le paupérisme dans les Flandres*. Bruxelles. 1850.

⁶ HILDEN, *Women, work, and politics: Belgium, 1830-1914*. 53.

⁷ SCHOLLIERS, 'Een vijand die men kennen moet'. Jenever in België in de 19de en vroege 20e eeuw.' 142.

⁸ DUCPÉTIAUX, E. *De l'intempérance et de l'ivrognerie dans la classe ouvrière*. Bruxelles. 1843. 4. as quoted in DECLERCK, S. *Genèse du discours anti-alcoolique en Belgique 1830-1970*. Mémoire de Licence, Université Libre Bruxelles. 1994. 37.

Edouard Ducpétiaux also contributed significantly to the reorganization of mental asylums in Belgium. Following his work on reorganisation of the care of the insane and in collaboration with *aliéniste* Joseph Guislain, a first lunacy law was passed in Belgium in 1850. This law aimed to protect citizens against accidents caused by insane persons.⁹ A ministerial circular, an administrative directive, by the Minister of Justice Jules Bara of 1867, explained that 'because people suffering an attack of delirium tremens can be a danger for society', disorderly drunkards threatening to endanger other members of society could be taken into confinement in a mental asylum under the same lunacy act.¹⁰ The condition for committal, a state of delirium tremens, was, however, ambiguous and difficult to identify. Bara was well aware of the ambiguity and the difficulty of defining the affliction. How to outline the terms of the incarceration seemed complicated and he suggested that it would depend on the circumstances and the characteristics of the patient. He described how some patients, after the attack had subsided, returned completely to their normal and calm self and how they recovered completely, so that they could no longer be kept in the mental asylum. But, he insisted, there was a second category of drinkers, those whereby after the 'folie furieuse' had subsided 'the disease entered a next phase'. They would feel an overwhelming need for drinking, which 'can be considered as a real mania'. Minister Bara warned that it would be fatal for the public

⁹ DUCPÉTIAUX, E. *De l'état des aliénés en Belgique, et des moyens d'améliorer leur sort: extrait d'un rapport adressé au ministre de l'intérieur, suivi d'un projet de loi relatif au traitement et à la séquestration des aliénés*. Bruxelles. 1832.

¹⁰ See further II. Drink and the doctors. 2. In practice: the alcoholic population of the Ghent asylums a. The asylums in Ghent. pp. 175-245.

safety but also for the well being of these people to let them go free and thus to allow them to give themselves over to new drinking bouts.¹¹

Drunkenness as a problem in its own right was placed on the Belgian political agenda for the first time when minister of finance Walthère Frère-Orban presented a report on the 'abuse of intoxicating drinks' before the Chamber of Representatives in 1869, which called for some form of state interference in the unlimited production and sale of alcohol in the country. The well-documented report revealed a notion of the over-consumption of drink as a male and working class vice and more importantly, of its fabrication and sale as a powerful economic force, that needed to be maintained.

Minister Walthère Frère-Orban's study of the problem of drinking, borrowed much of its ideas from the work of Edouard Ducpétiaux. Because there had been little further attention to drinking habits in Belgium, the evidence Frère-Orban used to underpin his report came mostly from other places where there had been more concern with drink, notably from England, the USA and the Netherlands, countries where temperance societies were long established and that could present a long record of anti-alcohol-legislation. Statistical evidence was for the minister of finance most convincing, but accurate information on the amount of drink that was consumed in Belgium proved difficult, if not impossible to find.¹²

¹¹ 'Circulaire ministérielle du 12 août 1867.' in *Recueil des circulaires, instructions et autres actes émanés du ministère de la justice, années 1866-67*. Bruxelles. 1868.169.

¹² VELLE, K. 'Statistiek en sociale politiek: de medische statistiek en het gezondheidsbeleid in België in de 19e eeuw.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. XVI, 1-2, 1985. 213-242.

Frère-Orban affirmed that 'of all vices, drunkenness [*ivrognerie*] leads most directly to moral and physical degradation', but he added immediately that it was also a very difficult problem to solve. Being in favour of a minimal state, the minister believed that governmental action was certainly not necessarily the right solution for this particular problem. The situation in England illustrated this very well: although this was a nation with more legislation designed to restrict drunkenness, the country suffered more than any other the effects of immoderate use of strong liquors, the minister told the members of parliament.¹³ There was indeed much evidence produced in Britain to underline the problems of excessive drinking, while there was none in Belgium, indicating rather how an enhanced interest in Britain shed a brighter light on a problem that was not acknowledged in Belgium.

As the brewing industry had become a vital part of the Belgian's economy, the economical mindset of Frère-Orban considered the licensing of drinking places an infringement on the principle of free trade; total prohibition would mean a complete economical disaster and had to be prevented by all means. Belgium's economy was until the middle of the 1860 dominated by agriculture and the rich landowners were a power in society that needed to be taken into account. They always had a considerable interest in the sale of hops and malt for beer and grain and sugar beet and even potatoes to make

¹³ FRÈRE-ORBAN, H. J. W. *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*. Bruxelles. 1868. 24.

spirits.¹⁴ In local politics, the brewer and distiller were part of the ruling caste. In 1893, brewers, distillers and rich pub landlords still made up a sixth of the voting public.¹⁵

Frère-Orban did ask for stricter regulations for clandestine distilling and the selling of alcohol. In every town there were legal and untaxed domestic distilleries where people made liquor from the fruits of their gardens and home brewing was very widespread.¹⁶ Condemning the home brewing industry as a cause of drunkenness played into the hands of the brewing and distilling industrialists who saw such practices as unfair competition. The problem of adulteration of beer and spirits and the need of the abolition of home brewing and distilling was one of the few issues related to the curbing of drunkenness that was brought up repeatedly in the parliamentary discussions on the subject during the nineteenth century.¹⁷

Frère-Orban's argument against government intervention in matters concerning drink was vague and ambiguous and it left much space for interpretation. He held that before considering any sort of action, policy-makers should 'consider very carefully the character, the habits and the institutions of the nation.' It was important to be extra mindful in trying to destroy drink abuse, so said the minister of economy further, because 'it finds its sources in the traditional habits of the people'¹⁸.

¹⁴ SCHOLLIERS, *Arm en rijk aan tafel: tweehonderd jaar eetcultuur in België*. 15. & SCHOLLIERS, "Een vijand die men kennen moet". Jenever in België in de 19de en vroege 20e eeuw.' 106.

¹⁵ PIRLOT, F. *L'alcoolisme en Belgique de 1830 à 1950. Mythe et Réalité*. Mémoire de Licence, Université de Liège. 1993. 91.

¹⁶ PRESTWICH, *Drink and the politics of social reform: antialcoholism in France since 1870*. 14.

¹⁷ I need to thank Erna Mannaerts at the Govevements Publications Library in Leuven for her assistance in tracing the parliamentary papers.

¹⁸ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*. 4.

In the nineteenth century, the numbers of bars had increased drastically in Belgium. When French temperance historians claimed that France had a much higher concentration of bars than any other industrial nation with one bar per 82 inhabitants in 1914, they overlooked Belgium that had a bar per 40 habitants in 1887 and one per 32 inhabitants by the turn of the century.¹⁹ In industrial centres like the mining district of the Borinage visitors counted one bar for five adult men.²⁰ By way of comparison, powerful temperance movements, regulations and licensing made that British industrial cities such as Manchester or Newcastle counted one public house per 175 inhabitants in the late nineteenth century.²¹ In Belgium, without licensing laws, everyone could open a bar, one just needed to pay a business licence, just like any other shopkeeper. The only expenses to open a bar were the price of a barrel of beer and a few bottles of spirits and many workers indeed did so, to supplement their income.

There were different classes in which a business could fall. The criteria to decide which tariff one had to pay were based on the value and profits of the establishment.²² Most bars were very small and not profitable. Those visited by wealthier clientele, selling more expensive beverages than just gin and beer, from the other hand, could do exceedingly good business and these bars would fall in a higher tax category.

¹⁹ PRESTWICH, *Drink and the politics of social reform: antialcoholism in France since 1870*. 16. & MARRUS, M. R. 'Social drinking in the Belle Epoque.' *Journal of Social History*. VII, 1974. 115. & *Annales parlementaires - Chambre des représentants*. Séance du 19 juillet 1887. 1659. & STATISTIQUE GÉNÉRALE DE LA BELGIQUE. *Exposé de la situation du royaume de 1876 à 1900*. Bruxelles. 1909. t. I. 313-314. & *Annales Chambre*. Séance du 15 juillet 1887, 1660.

²⁰ *Annales Chambre*. Séance du 19 juillet 1887, 1660.

²¹ *Parliamentary Papers. Reports from the Commissioners, 1878-9*, X, 'Proceedings of the Select Committee on Intemperance House of Lords', 16 & 173. as quoted in my MA dissertation *Class Gender and Alcohol in the Making of the Habitual Drunkards Act, 1870-1879*. UCL, 2001.

²² ANKAERT, 'Les cabarettiers-caféttiers à la fin du XIXe siècle.' 35.

Shopkeepers paying higher business rates had become eligible to cast a vote since in 1849. Richer public house owners had become new voters and many had opened a bar especially to be entitled to vote. In 1871, no less than 10 percent of those taking part in the ballot were cafe-owners, a considerable part of the bourgeoisie.²³ Although this regulation was blamed for directly encouraging drunkenness, Frère-Orban defended it. He maintained that the constitution held that direct taxes were taken into consideration for a vote and the business licence was certainly a direct tax.²⁴ It was hardly surprising that Frère-Orban watched over the interests of the rich publicans, as he owed much of his political career to them.²⁵ His future liberal governments would be firmly in place partly owing to the vote of wealthy café-owner and drink sellers. When in 1870 a Catholic government came to power, they immediately passed a law that excluded the duty on the sale of alcohol from taxes qualifying for franchise. This decision was taken, not out of consideration with possible excesses of drunkenness, but out of political interest, as public house owners would as a rule vote liberal.

Whereas there was no central government legislation in Belgium on public drinking at the time Frère-Orban was writing his report, a few local provincial councils had taken up some regulation to check the problem. The province of Antwerp prohibited the peddling of liquors and issued local acts to punish public drunkenness in 1860. These rules were, however, in practice mostly ignored and several towns falling under this provincial jurisdiction, completely and openly disputed the new rules. The city of Lier did not

²³ VERBOVEN, H. 'Jenever en fiscaliteit.' in VAN SCHOONENBERGHE, E. ed. *Jenever in de Lage Landen* Antwerpen. 1996. 183.

²⁴ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants.* 138.

²⁵ WITTE, E., CRAEYBECKX, J. & MEYNEN, A. *Politieke geschiedenis van België: van 1830 tot heden.* Antwerpen. 1990. 57.

agree with the stipulations of the provincial law on public drunkenness. It was argued that 'because of the publicity a repressive legal proceeding brings with it', this law could 'needlessly destroy the reputation of honourable men as nobody is completely to be sheltered from an incidental drunkenness [*une ivresse accidentelle*] as a result of exceptional circumstances.'²⁶

The minister Frère-Orban used this same objection to argue why national legislation for drunkenness would be unworkable. Drunkenness was such an ambiguous state: it was totally unclear when moderate drinking became excessive drinking. A condition of drunkenness was too ambivalent: 'when does a socially acceptable activity change into a socially repugnant evil?' asked the minister rhetorically. When he then raised the question on what sort of drunkenness the state should punish, he in fact meant to say: 'which drunkards should the state punish?'

Because although drunkenness was generally depicted as a working class problem, it was clear to all that it also extended to the upper classes. Yet, it was impossible to think that the respectable gentleman in an inebriate state on his way back from the café could be arrested in the same way a common working class drunkard would. The members of parliament, reading the report, surely could think of an instance whereby someone of their own class, if not themselves, had been completely drunk after a chic dinner. But in such cases 'friends would generally show the delicate attention to wrap him up in a

²⁶ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*. 117.

carriage and to drive him home, so he escapes publicity.²⁷ For people belonging to lower social classes, however, drinking and drunkenness would be in the public eye.

Frère-Orban therefore differentiated 'voluntary' and 'involuntary' drunkenness, 'accidental' or 'habitual' drunkenness, 'public' or 'non-public'. He believed that governments were only justified to punish 'public drunkenness,' as a result of the scandal it would provoke and the dangers that it could possibly imply to public order²⁸. But what he called 'accidental' or 'involuntary' and 'non-public' drunkenness had to escape all penalties. Habitual drunkenness [*ivresse habituelle*], on the other hand should be punished since it was according to the minister, always voluntarily. It would lead to the vice of drunkenness [*ivrognerie*].²⁹ The difference between *ivrognerie* and *ivresse* does not exist in English. Both mean 'drunkenness', but *ivrognerie* refers to repeated heavy drinking.³⁰ Frère-Orban did never use the word *alcoolisme*, but instead talked about people who were *adonné à l'ivrognerie*. (litt. : devoted to drunkenness)

The minister concluded that the most effective way to combat the plague of drunkenness was not through state intervention or licensing but with 'moral means'. Because drinking was seen as a personal, moral failure, it was the responsibility of the individual to keep it under control. Not everyone, however, had the necessary moral

²⁷ FAIDHERBE, A. *Leçons sur l'alcoolisme*. Bruxelles. 1904. as quoted in PIRLOT, *L'alcoolisme en Belgique de 1830 à 1950. Mythe et réalité*. 59.

²⁸ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*. 112

²⁹ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*. 112.

³⁰ Brian Harrison raises in this context the difference between French and English drinking habits, which he believes still exist today: the French seem to drink more over a long period of time, while English drunkenness is characterised by sporadic excessive drinking bouts. HARRISON, B. *Drink and the Victorians: the temperance question in England, 1815-1872*. Pittsburgh. 1971. 25.

knowledge to make that personal decision to drink only within 'acceptable limits' and the working class and their children were believed to be in need of guidance. The minister therefore promoted private initiatives like temperance movements and anti-alcohol education.

The 'traditional habits and customs of the people' which had served as such an important line of argument to oppose possible government intervention, were now no longer a hindrance, although the moralising campaigns he proposed as an alternative were equally intended to change these habits. When drinking became at long last an issue in Belgian politics in 1868, it was mainly out of concern of the economical status quo and of the conservation of liberal freedoms of trade and import. The vague conclusion of the report on 'the abuse of intoxicating drinks' was that 'one is allowed to doubt the action of public powers to combat drinking.'³¹ As an advocate of a minimal state and maximum freedom, Frère-Orban's answers to the drink question were evasive, ambivalent and not conclusive. Internal incoherencies and his attempts to delineate between different types of drunkenness, indicate that the problem of drunkenness was too ambivalent and broad for the state to control.

After 6 years of liberal governments under Frère-Orban, the liberal party was severely defeated by the conservative Catholic party in 1884. The Catholics would now remain uninterrupted in control of government until 1914. Like the liberal party before them, Catholic leaders too remained completely oblivious to the dreadful conditions in which the large working class lived and worked. Also for them, drunkenness was considered a personal vice and the responsibility of the individual, not of the state.

³¹ FRÈRE-ORBAN, *De l'abus des boissons enivrantes. Renseignements déposés à la Chambre des représentants*.153.

b. Catholics, liberals, socialists: change and drink: 1884-1887

As political tensions grew, representations of drinking habits became weapons in political propaganda. In 1885, a socialist party was founded to campaign to improve the abysmal living and working conditions of the Belgian workers, which deteriorated even more as an economic crisis had provoked considerable unemployment. Although the prudently named 'Belgian Workers Party' promoted a very moderate and reformist version of socialism and their approach was always pragmatic, religious differences prevented the party from bringing together more than a part of the working class.³² Nevertheless, when they introduced cooperatives and societies for mutual assistance attached to their political cause in industrial centres, many workers changed sides.³³ But in the eyes of the traditionalist parties, those promoting socialism were dangerous agitators. In the smaller centres and the villages deeply embedded in Catholic structures, people reacted negatively, even violently against any form of socialist campaigning.

For Catholic temperance campaigners, frugality by moderation was the proper and acceptable way to reach social fairness. A story printed in a Catholic anti-alcohol publication in 1899, told how a socialist militant was inciting workers against their patrons. The agitator insisted that his fellow workers should have the right to a horse and carriage, like the capitalists. Among his audience was a 'converted' drinker, – religious language was omnipresent in the discourse– who 'knew that many among them who considered their wages insufficient, often drank half or a third of it'. When at

³² LORWIN, V. 'Belgium, religion, class and language in national politics.' in DAHL, R. A. ed. *Political opposition in Western democracies*. New Haven. 1960. 156.

³³ HOBBSBAWM, *The age of empire, 1875-1914*. 117.

that very moment the landlord of the pub passed in his own carriage, the teetotaller shouted: 'You want to know where your carriage is? Look, the pub-landlord is driving it.'³⁴

Political adversaries from all sides were generally represented as drunken and debauched. Socialists and liberals fumed against what they called the Catholic hypocrisy relating to drinking and promiscuity and in their narratives, drunken and loose priests and monks featured prominently.³⁵ However, it was especially the Catholics who went very far in denouncing the representatives of the working classes, those anti-Catholics that had forsaken the church, as debauched and above all drunken. For example, in one piece of propaganda, the Catholic writer explained the innate immoral and alcoholic character of the socialist workers:

From the moment the road of the church is taken away from them, they briskly walk the road of political meetings, where their yearning for amusement and sensual pleasures is stimulated, after which they [...] go and apply the doctrine of their seducers in the gin-bars, where they intend to satisfy their animalistic urges.³⁶

³⁴ Vaderlandschen bond tegen alchoolism. *Almanak der matigheid*, Brussel. 1899. 68.

³⁵ BUYSSE, C. 'Het ezelken.' *Verzameld werk*, II, Brussel, 1910.& 'Klachten van pastoor en koster over het Gents Gemeentekerkhof'; 'De Drij paters'; 'Er moet vanalles zijn'; 't Nieuw Woeste ministerie'; 'Geene scholen meer!' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 239, 359, 448, 471 & 53.

³⁶ STERCK, F. *Onze dorpen en de sociale kwestie*. Ninove. 1891. as quoted in DE NIL, 'Het sublieme verschil. Tussen naturalisme en 'geslachtsdeelrealisme'. De Vlaamse sociaal-democratie en seksualiteit in de roman vòòr 1914.' 427.

Such language depicts the working classes as immature and easily lured in temptation. Once the protective moral framework of religion is taken away, workers showed their real primitive nature, consisting of 'urges' and 'yearnings' for pleasure and drink.

The bourgeois anti-alcohol movements also relentlessly exploited the argument of the innate simple and uncivilised, alcoholic and politically dangerous working classes in their propaganda. Peter Scholliers argued that the Belgian bourgeoisie, both Catholic and liberal, in their rhetoric against drink, drew on the drunkenness and alcoholism of a few to accuse the working class as a whole all as potential irrational drunkards. The bourgeoisie therefore in fact 'created' the problem of alcoholism and Scholliers denied their argument that there was a steep rise in alcohol consumption among the workers in the last half of the nineteenth century. Having researched the correlation between workers' wages and the amount of alcohol consumed, he concluded that alcoholic drink only became part of the family budget if it could be afforded. Mostly, however, the workers simply did not earn enough to spend anything whatsoever in the 'cabaret'.³⁷ This was also what contemporary socialists argued. Journalist Auguste de Winne was told by the workers in Flanders whom he interviewed that they never ate meat and drank 'less than ten glasses of beer a year.'³⁸ However, those Flemish farmers, whose misery had driven them to France to work, staying away from their village for the entire season, were known as rough men and heavy drinkers, preferring to drink gin rather than wine. ³⁹ They indeed would have had more money to spare to spend on drink. It is certainly important to remember as well that locals often received those emigrant

³⁷ SCHOLLIERS, "Een vijand die men kennen moet". Jenever in België in de 19de en vroege 20e eeuw.'155.

³⁸ DE WINNE, *Door arm Vlaanderen*. 43.

³⁹ DE WINNE, *Door arm Vlaanderen*. 118.

workers, who brought down the wages, with hostility, an attitude that would certainly have influenced this negative image.⁴⁰

The propaganda of the bourgeois temperance movements painted a haunting prospect of personal attacks by drunken revolutionaries, to be awaited for those remaining apathetic in remedying excessive drinking. They contended that if proprietors and bourgeois would not start campaigning against alcohol, the threatening political situation would worsen and escalate even further. Temperance writers warned that: 'a people that spends all it has in order to become numb and to get over-excited, will turn its insanity [*démence*] against you!'⁴¹ The place where political grievances were expressed and discussed was always the bar and more than once, anti-alcohol pamphlets described the bar as 'the home of socialism'.⁴² Merely the fact that socialist meetings took place in meeting rooms behind the cabaret seemed for many a very good reason to fulminate against it.

The secret police, always on the outlook for prospective insurgents, had already before the onset of mass socialist action stressed the influence of drink on possible uprisings and prejudices about the innate drunkenness and irrationality of socialists surfaced in their reports. On the lookout for socialist uproar among the working classes undercover agents were to infiltrate bars where socialists meetings were believed to take place. When a policeman was briefed about a meeting organised by a radical socialist

⁴⁰ DERAINE, P.-J. 'L'hostilité aux ouvriers belges en France au XIXe siècle.' in MORELLI, A. ed. *Histoire des étrangers et de l'immigration en Belgique de la préhistoire à nos jours*. Bruxelles. 1992.

⁴¹ CAUDELIER, E. *L'alcoolisme en Belgique*. Bruxelles. 1889. 42.

⁴² 'Le Cabaretisme' in *Journal de la Ligue Patriotique contre l'alcoolisme*, Bruxelles, jan-feb 1891, 386.

organisation *Les Cercles Réunis*, in the autumn of 1880, in a bar owned by a worker-joiner in the metal industry around Liège, he reported:

A group of louts [*voyoux*] all in rags, seemingly drunk, came into the room, with a red flag (a red handkerchief, tied to a stick). They started to sing *La Carmagole*, gesticulating, dancing and vowing that the police would never rip their flag. The individual that carried the rag, balanced it on top of my head.⁴³

When the informer realized that not much of a 'proper' meeting was going to take place after all and that they had realised who he was, he left again. The undercover agent described the 'meeting' as trivial and unorganised and its participants as irrational and drunk instead. Underneath the policeman's disdain for the socialist workers, captured in the description of their pathetic red flag and the place of meeting, which he described as 'a hovel', one senses within the language of the report a feeling of threat and an inarticulate fear for uncontrollable, revolutionary passion. The group that had entered the bar had seemed drunk [*paraissant être ivres*], but the informer had not been quite sure of that, he just assumed it. A revolutionary fever could, like madness, become confused with mass-drunkenness. Drunkenness, an essential loss of control, was spontaneously linked to revolution.

In the spring of 1886 the strained class antagonisms in Belgium exploded. The general strike that erupted in the Southern industrial areas was spontaneous and the young

⁴³⁴³ WOUTERS, H. *Documenten betreffende de geschiedenis der arbeidersbeweging ten tijde van de 1e Internationale (1866-1880)*. Leuven. 1970. 1639. *La Carmagole* was the preferred song for the anarchist wing of the socialist movement between 1880 and 1890. VAN DE MERWE, J. *Gij zijt kanalie, heeft men ons verweten! Het proletariërslied in Nederland en Vlaanderen*. Utrecht, Antwerpen. 1974. & VANDECAVEYE, H. 'Het proletariërslied, een sociaal-kulturele verschijningsvorm van de socialistische arbeidersvereniging.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. VI, 2, 1980. 171-202.

'official' socialist party had not been involved with its organisation.⁴⁴ Its violent repression by the army lead to riots and many of the leaders of the movement were arrested and many innocent participants were wounded and even killed. Only after months of bloody confrontations between workers and authorities was the rebellion put down.⁴⁵

Most Belgian bourgeois commentators were convinced that the major strikes had been stirred up by drunken agitators. The victimised bourgeois owners could not think of another reason for the uprisings than the malicious influence of the bar.⁴⁶ The liberal anti-alcohol campaigners, belonging to the same social class as the proprietors, agreed whole heartedly:

Strikes are coalitions very often formed by alcohol. Who do we see at the front of the movement but evil and mentally defective [*tares*] beings of incorrigible intemperates? Who are those who they manage to recruit first? The idlers, hanging around in bars, denigrators of property and family. It is in the bars that strikes ferment, it is in dives that popular uprisings are organised, it is in clubs, made up by malcontents and those worn out by alcohol, that revolutions and other disorders of the same kind are hatched.⁴⁷

⁴⁴ WITTE a.o., *Politieke geschiedenis van België: van 1830 tot heden*. 73.

⁴⁵ HILDEN, *Women, work, and politics: Belgium, 1830-1914*. 162.

⁴⁶ GAUSSIN, F. *Le fléau moderne : traité complet médico-moral de l'alcoolisme ; causes, effets, remèdes*. Namur. 1901. 223. & CAUDELIER, *L'alcoolisme en Belgique*. 26. & VAN COILLIE, ED. *Alcoolisme et habitations ouvrières*. Bruxelles. 1892. 30. Also in France, the idea of drink as the fuel for revolution became an important part of the discourse as the violence of the Commune had been blamed to drunkenness. HARRIS, R. *Murders and madness: medicine, law and society in the Fin de Siècle*. Oxford. 1989. & BARROWS, 'After the Commune. Alcoholism, Temperance and Literature in the Early Third Republic.' 205-218.

⁴⁷ GAUSSIN, *Le fléau moderne : traité complet médico-moral de l'alcoolisme ; causes, effets, remèdes*. 223.

In court, many of those arrested for revolutionary activities invoked their drunkenness as a mitigating factor. They believed that, by arguing that they had acted 'under the influence' and thus in effect had been in a state of temporary madness, responsibility could be denied.⁴⁸ Specialists indeed argued that sometimes when the result of mental disease drunkenness, 'had to be considered as completely irresponsible.'⁴⁹ But the assumptions of the insurgents were mistaken: in their case the defence of drunkenness would not lead to a reduced sentence and they were deemed fully responsible for their acts.⁵⁰

The intensity and violence of the revolt by the normally obedient and docile Belgian workers compelled the Catholic government to action. In April 1886 a parliamentary enquiry commission was set up 'charged to enquire into the situation of industrial work in the kingdom and to study the measures that could improve it'. The commission, which became immediately known as *la Commission du Travail*, was to examine the social and economic conditions of the factory workers. It consisted of 37 members of 'specialists', who were mostly conservatives: there were lawyers, clergymen and professors in economy and engineering, but no doctors.⁵¹ Among the witnesses invited

⁴⁸ VAN COILLIE, *Alcoolisme et habitations ouvrières*. 30.

⁴⁹ LENTZ, F. *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolégal*. Bruxelles. 1884. 564

⁵⁰ Workers in murder trials would do often the same. They believed that the plea of drunkenness could be a valuable defence, but it was hardly ever accepted. BIESMANS, J. *Negentiende passionele misdrijven. Beelden en werkelijkheid*. Licenciaatsverhandeling, Universiteit Gent. 2001. Roger Smith has noted for the English situation that drunkenness was seldom taken into account as a mitigating factor in court cases and Ruth Harris has come to the same conclusion: not one defendant of murder in the Parisian court-cases she studied was identified as a 'dipsomaniac'. HARRIS, *Murders and madness: medicine, law and society in the Fin de Siècle*. 254. & SMITH, R. *Trial by medicine : insanity and responsibility in Victorian trials*. Edinburgh. 1981.

⁵¹ SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' 321.

to give evidence there were several medical professionals and for the very first time also delegates of the workers. But as many workers feared for their jobs they mostly told the commissioners exactly what they wanted to hear.⁵²

An entire section of the *Commission du Travail* was dedicated to research the problem of *alcoolisme*. Drunkenness was dealt with under the chapter on the 'intellectual and moral state' of the workers. This section included furthermore issues of education and illiteracy and what was considered sexual promiscuity among the workers. Drunkenness was unmistakably from the start approached as a problem of questionable morality among the working classes.

The first two questions the commissioners asked their witnesses in connection with drunkenness were: 'Does intemperance rage among all classes of society?' and 'Does it affect both sexes?', highlighting a profound preoccupation with both the class and the gender aspect of the problem. Most of the answers to these questions were that it was mostly the men and only the working classes that were giving themselves over to drink. Nearly all the witnesses found that drunkenness was one of the main reasons for the appalling social conditions of the factory workers. The beer the workers drunk was believed to be all right and healthy, but, as 'the worker prefers strong alcohol by natural disposition'; gin-drinking was identified as the problem that needed tackling.⁵³ The worker's 'natural' devotion to strong liquor was attributed to a, equally 'natural', lack of morality and self-restraint.

⁵² DUMONT, *La vie quotidienne en Belgique sous le règne de Léopold II. (1865-1909)*. 123.

⁵³ Commission du Travail, institué par arrêté royal du 15 avril 1886. Volume V. *Procès-Verbaux des séances de l'enquête agricole*. Bruxelles. section D. 40. 657.

Only a few representatives of the workers in their testimony before the commission explained how they believed that it were the terrible conditions in which the workers had to live that drove them in to the public house. The delegate of *la Groupe du Fond-des-Loups*, a working men's organisation in Verviers, informed the commission that he believed there to be intemperance in all classes of society. People from the higher classes drank because they liked it, he claimed, or as a result of their decadent life-style while in the lower classes drink was often a result of misery or to a means forget about it.⁵⁴ For another witness who acknowledged bourgeois drinking, it was the prerogative of the bourgeois youth of a new 'modern' generation.⁵⁵

These few, feeble opposing voices placed the panic surrounding what was called the 'blight of drunkenness and alcoholism' into perspective, asserting that the problem of drunkenness was not all that bad as was generally assumed. The workers seldom drank gin, an ex-miner from Herstal told the commission, further undermining hereby what was generally assumed, if only just because they simply could not afford it.⁵⁶ And when asked about female drinking, he explained that the women indeed sometimes drank a glass, but not commonly.

Jean Coppin, a policeman in Roux close to Charleroi, was also concerned about female working class drinking. He found that in fact there was much drinking among the women in his town, but they would usually not go to the cabaret. Those women would

⁵⁴ Commission du Travail, institué par arrêté royal du 15 avril 1886. Volume I. *Réponses au Questionnaire concernant le travail industriel*. Bruxelles. 1105. 5418.

⁵⁵ Commission du Travail, I. 5352.

⁵⁶ Commission du Travail, institué par arrêté royal du 15 avril 1886. Volume II. *Procès verbaux des séances d'enquêtes concernant le travail industriel*. Bruxelles. section D. 7. 72.

drink gin bought at the grocer's or in the pub at home taking advantage of the time when their husband was at work to engage in those excesses. The women sometimes met in groups, Coppin understood, for what he called 'gin-parties'. Also other witnesses pointed out an anxiety with secret female drinking. As rules of respectability prevented women from buying their alcohol overtly they would for example carry alcohol from the greengrocer in bottles equipped with a wick, to make it look as if they were buying petroleum.⁵⁷

Commissioner Arnaud believed that working women were the cause of the problem of male drinking. Drunkenness among the miners in the Borinage, he knew, was in large part due to the fact that their daughters worked in the mines and therefore could not be educated in the knowledge of housekeeping:

A pit girl doesn't know how to clean the house properly, nor how to wash the linen, even less about ironing and she's unable to sew, to make soup or to take care of a child. ⁵⁸

No wonder then, he concluded and most agreed, that the miners preferred to remain in the public house after work, rather than to go home and stay sober.

On the question on the rise in immorality among the workers, many respondents believed it to go hand in hand with the increase of alcoholism and of a lack of education. The problem of prostitution was more than once cited as both the reason and the result of drinking. Alcohol was, through this link with prostitution, also felt to be related to the

⁵⁷ Commission du Travail, I. 836. 314.

⁵⁸ Commission du Travail, institué par arrêté royal du 15 avril 1886. Volume IV. *Compte rendus des séances plénières. & Mémoires, rapports, lettres etc. envisageant la question ouvrière dans son ensemble.* Bruxelles. 107.

very worrying problem of syphilis. The immediate culprit was, most agreed, the overabundance of places that would incite drinking and immorality, like dance-halls, bars, *café-chantants*, but also brothels.

Some medical witnesses referred to the hereditary aspects of drink. Dr De Mayer, physician in the ceramics industry of Boom near Antwerp warned the commission about the effects of alcoholism on the offspring. In this regard, he believed, alcoholism was indeed a serious curse for society. He found that, taking the intemperance of the Belgian workers in account, it was no wonder there were numerous people suffering from physical and intellectual illnesses such as epilepsy and hydrophaly and so many who are unsuitable for any education.⁵⁹

But among the witnesses worried about heredity problems of drinking, it was not only the doctors that were concerned. Léopold Serigiers, for example, the manager of a brick-making factory in Beerse, in the very poor rural Campine region believed that drunkenness could never be cured and forceful detention was for him the only possible solution for the problem. He urged the commission to realise the extent in scale of its mission to solve this problem, since new-born children, among his workers almost all conceived in this state of drunkenness, he supposed, would necessarily show the symptoms of *un mal héréditaire*. This would manifest itself in its turn by an irresistible tendency towards alcoholic drinks, as the only possible agent to wake up 'their nervous centres atrophied by several generations of drunkards.' He believed that all activities proposed to contribute to sobriety, like music bands, would serve exactly the opposite

⁵⁹ Commission du Travail, I. 1111.

purpose, providing an opportunity to drink a first glass, which would mean the beginning of the end.⁶⁰

In spite of some contrary assertions by several witnesses, in the final report of the *Commission du Travail*, the general tone of the argument was familiar: drinking was a vicious habit of the workers, who wasted their wages on it and therefore landed up in poverty. Historian Eliane Gubin has concluded that the final report of the *Commission du Travail* was not prompted by the actual answers on the questions, but was based on the preconceived ideas and prejudices of the committee members.⁶¹ The distinction between the 'good' worker and the 'bad' worker, as already established by people like Edouard Ducpétiaux a few decades earlier still permeated the thinking now. The commissioners agreed that there were indeed workers who were hard working and loyal to their employers, who managed to feed their families and thus showed that the received wages were sufficient. The problem was located among another 'type' of workers: those that were lazy and wasted their income on drink. Therefore they lived in misery and were easily lured into the nets of the socialists.⁶²

The commission proposed in its report several plans of action to the government to diminish the problem of drink: first of all the limitation of the numbers of bars, through the implementation of a licensing system. They also recommended the promotion of temperance movements and anti-alcohol education and a sharper control on the

⁶⁰ Commission du Travail, I. 1102.

⁶¹ GUBIN, E. 'Les enquêtes sur le travail en Belgique et au Canada à la fin du 19e siècle.' in KURGAN - VAN HENTENRYK, G. ed. *La Question sociale en Belgique et au Canada: XIXe-XXe siècles*. Bruxelles. 1988. 93-122.

⁶² PUISSANT, J. 'Le bon ouvrier, mythe ou réalité du XIXe siècle. De l'utilité d'une biographie. J.F.J. Dauby (1824-1899).' *Revue belge de philologie et d'histoire*. LVI, 4, 1978.899.

production of adulterated and bad quality spirits. But the *Commission du Travail* also still expressed serious reservations about the extent of the actual role of the state.⁶³ Drunkenness, after all was a problem that affected individuals and an ideal justification for this argument was offered by the scientific idea of alcoholic heredity. Officially, however, in the final discussions of the commission it was agreed that the argument of biological predestination should not be used to defend apathy towards the problem of alcoholism. Adophe Prins, professor of criminal law at the university of Brussels and General Inspector of Prisons and as such invited as specialist to give evidence before the *Commission*, contended that alcoholism, as the stigma of degeneration, was the genesis of all crimes and that it should be penalised when public. He concluded that one should attack the evil in its source and therefore punish drunkenness when it happened in public.⁶⁴

As part of a series of measures to 'control' the working class in the wake of the strikes and following the report of the *Commission du Travail*, the Belgian parliament indeed approved a law on public drunkenness. The time had arrived for such legislation, explained minister of Justice Devolder, evaluating the proposal, because by 1887, Belgium was the only European country without a national law on public drunkenness.⁶⁵ Public drunkards and those who caused trouble were mainly dealt with under the regulations on vagrancy and on lunacy and prisons, 'agricultural colonies' and asylums provided for their institutional care. Devolder believed that in 1887, the attitude in

⁶³ Commission du Travail, institué par arrêté royal du 15 avril 1886. Volume III. *Rapports. Proposition des Sections et conclusions* Bruxelles. 191-206.

⁶⁴ Commission du Travail, IV. 105.

⁶⁵ *Documents parlementaires - Sénat*. Séance du 5 août, 1887. 523.

Belgium towards alcohol had changed, compared to a few years ago, when Frère-Orban presented his report and when the 'public opinion did not directly demand a reform.' Catholic member Comte Henri de Mérode, who presented the law in the *Chambre*, was more sceptical: he regretted that in Belgium drunkenness was still 'firmly rooted in the national habits'. Being drunk was still not deemed something embarrassing or degrading, but instead it was found amusing and entertaining.⁶⁶

De Mérode embraced the general feeling of unease with arguments of 'dangerousness' while using medical claims to argue the case for the bill. He referred to reports written by temperance doctors explaining how alcoholism would predispose people in a fatal way to commit certain crimes and he quoted the last report of the situation of the insane asylums in Belgium confirming an alarming rise in apprehensions of alcoholics. The language of degeneration was very clearly present in his parliamentary speech: drunkenness led straight to the 'degeneration' [*abatardissement*] of the race and its physical 'decay' [*décrépitude*]. He who gave himself over to drink, would not only would suffer from it himself, but 'he prints the permanent physical and moral stamp of his weakness onto his offspring.'⁶⁷

There was, nevertheless, another kind of drunkenness, added the *rapporteur*. It concerned a special class of 'professional drinkers', difficult to define, but so much more dangerous: he referred here to the 'unlucky sufferers of chronic alcoholism' who partook quietly in civil and political life, while in actual fact semi-irresponsible. 'Chronic alcoholism' did not, according to de Mérode, quoting dr. Charles Petithan, imply drunkenness 'in the

⁶⁶ *Documents parlementaires - Chambre des représentants*. Séance du 24 mai, 1887, 162.

⁶⁷ *Documents Chambre*. Séance du 24 mai, 1887, 162.

real sense of the word', but neither was it to be called 'ordinary madness'.⁶⁸ Medical opinion called this condition, he said, 'a morbid state as a result of a sometimes very slow poisoning, of a regular absorption of spirits which could possibly never even have led to drunkenness' [*ivresse*]. This pathology, explained de Mérode, partially deprived the sufferer of his faculties, especially the will, and it even could induce him to commit crimes.⁶⁹ But the idea of legislation for this type of drunkard, which they knew all too well, was laughed down: there were certainly 'plenty of such irresponsible individuals in politics and civil service in the entire world'.⁷⁰ The members furthermore agreed that it was a very unlikely idea that a Belgian citizen would voluntarily surrender his liberty to enter a treatment clinic, as was done in Britain and as some eminent doctors had proposed. 'One has to know our habits very badly to believe that an alcoholic could provoke his own imprisonment!' exclaimed De Mérode. He concluded that 'the greatest abuses were to be feared' and that as legislators, they were incompetent to 'review this delicate point in more detail.' Thus, it was clearly agreed that this type of drunkenness was not to be dealt with in the law.

Instead, the drunkenness that would fall under this legislation was a moral vice of the badly educated working class. But the radical liberal Jules Bara understood the difficulty in demarcating that distinctive type for drunkenness that would exclusively affect the workers. The proposal on the table dealt with an issue that in theory could affect everyone, all the classes of society, he explained. There was again laughter in the house

⁶⁸ PETITHAN, C. *Répression de l'alcoolisme. Interdiction, collocation*. Liège. 1881. as quoted in *Documents Chambre*. Séance du 24 mai, 1887, 164.

⁶⁹ *Documents Chambre*. Séance du 24 mai, 1887, 164.

⁷⁰ *Annales Chambre*. Séance du 15 juillet, 1887, 1645 & SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' 232.

when he declared that there was not even 'ecclesiastical immunity'.⁷¹ The bill under discussion stated that everyone in 'manifest state of drunkenness' in a public place could be punished and 'everyone' evidently not just meant working class men. Most of the members of the house consequently presumed that it would be impossible to generally apply the law and that exceptions had to be made. Conservative leader Charles Woeste, for example, welcomed the law provided that 'it is not too rigorously applied'.⁷² But Jules Bara said he did not see the point in making 'laws that would not be applied, or laws that when rigorously applied would be bad laws'. Because it would 'tend to humiliate honest men, who 'forget themselves' once and who could have to carry the rest of their lives a conviction for scandalous drunkenness'. A second problem for Jules Bara was the definition of *ivresse manifeste*? What were to be the conditions for that state, how would you recognise this and who was going to make that decision? He wondered if the law meant then that 'we are going to fine a honourable person, a public functionary, perhaps a mayor, who once let loose at a dinner party?'⁷³

Jules Bara wanted the house to admit that the reason for passing a law on public drunkenness was because of 'what had happened last year in Charleroi'. He accused the House of creating 'all sorts of new crimes', under the pretext to better the conditions of the workers. As a liberal, Bara's main concern was the interference of a law on drunkenness into the private life of citizens: 'let us not penetrate in the private life of the

⁷¹ *Annales Chambre*. Séance du 19 juillet, 1887, 1650.

⁷² *Annales Chambre*. Séance de 19 juillet, 1887, 1656.

⁷³ *Annales Chambre*. Séance de 19 juillet, 1887, 1656.

people, let us not make laws for all the vices of human nature, we do not have a mission to reform the society and to let virtue rule everywhere.'⁷⁴

However, the all-important claim for the need to protect personal liberties in legislating for public drunkenness was apparently annulled when dealing with prostitutes. Since the time of Napoleon they had been the subject of rigid government control in Belgium, and when a prostitute breached the regulation of her trade with 'scandalous behaviour' or with drunkenness or fraud, she was sent to prison straight away.⁷⁵ By the 1880's, illegal prostitution thrived in neighbourhoods where official prostitution was forbidden, often in bars. Some members of parliament wanted to see the confusion over the regulations on the sale of drink in brothels cleared up within the bill on public drunkenness and much discussion time was devoted to it.⁷⁶

Ultimately, the final law of public drunkenness included a check on the sale of alcohol in brothels, while nowhere in it, nor in the initial proposal of 1887, was a regulation or licensing of any kind for ordinary bars mentioned. The many prominent drink sellers and high-ranking individuals with interest in the brewing industry were simply too influential to take action against.⁷⁷ Too many leading persons in towns and villages owned bars or were involved in the drinks-trade and obstructed any legislation on

⁷⁴ *Annales Chambre*. Séance du 19 juillet, 1887. 1667.

⁷⁵ DE SCHAEPPDRIJVER, S. 'Reglementering van prostitutie 1844-1877. De opkomst en ondergang van een experiment.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. XVII, 3-4, 1985. 473-506.

⁷⁶ *Annales Chambre*. Séance du 19 juillet, 1887. 1654.

⁷⁷ *Annales parlementaires - Sénat*. . Séance du 4 août, 1887, 516.

regulation of the sale of drink.⁷⁸ As late as in 1904, the Belgian minister of finance still spoke out against licensing public houses:

one cannot dream of legally restricting the number of public houses. Any legislation for such a purpose would be contrary to the spirit of professional and commercial liberty. It would be arbitrary, for it could not be based upon any fair or rational foundation.⁷⁹

When the final law on public drunkenness was voted, with many amendments, it was a law to punish drunk and disorderly behaviour. The formulation of 'manifest drunkenness', which had been such an obstacle, was amended to 'a state of drunkenness causing disorder, scandal, or danger to oneself or others.' The fines were higher when it concerned someone having a profession which demanded 'greater caution', like civil servants, and the punishment was likewise more severe for someone carrying a loaded gun. Pub landlords would be liable to punishment, when serving drink to already drunken customers or to children younger than 16 years unaccompanied by an adult to consume on the premises. The court could decide that a person arrested in a drunk and disorderly state would be denied the right to practice the profession of judge, tutor and judicial counsel, for a period in between two to five years and the profession of pub landlord for a period of two years, while the sentence was made public. The law also banned the retail of any food and drink in brothels. There was further a clause to prevent the accumulation of debts in the public house.

⁷⁸ *Annales Sénat*. Séance du 15 juillet, 1887, 1645-1649.

⁷⁹ as quoted in SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 314.

Ultimately, it was required that the text of this law against public drunkenness should be advertised in all public houses in the two languages of the country. This obligation was hardly ever observed: one landlord had put the text of the law in the toilet, joking that it was the most important place in his bar.⁸⁰ In general, the law was never taken very seriously and often ridiculed. In a song specially dedicated to it, cabaret-singer Karel Waeri in Gent, presented it as a perfect opportunity to play a practical joke on a pub landlord, referring to the clause that the publican was to be responsible for drunkards in his property. Soon, sang Waeri, the entire police-corps will be locked in jail, referring to local policemen who were used to drinking with the people in neighbourhood bars.⁸¹

Because those *garde-champêtres* seldom arrested people for public drunkenness and mayors were often afraid of unpopularity, in practice the *Loi d'ivresse publique* of 1887 was not commonly enforced. Apart from the practical difficulties of enforcing it, the law was perceived as not helping to remedy the problem of drunkenness. The last stanza of Waeri's song *De Drankenwet* illustrated well its futility. It quoted a Brussels woman, released from prison after being arrested for public drunkenness for the fifth time, saying: 'bye gentlemen, see you later, I will be back soon.'⁸² For Waeri and many other critics of the measure, the law on public drunkenness dealt with the symptoms of the

⁸⁰ *Het volksgeluk*. meert 1912, 21.

⁸¹ *Le mouvement hygiénique* (M.H.) VIII, Aout 1895, 374. & *Annales Sénat*. Séance du 4 août, 1887, 519. Local policemen were, however, forbidden by law to run a 'cabaret'. VAN OUTRIVE, L., CARTUYVELS, Y. & POSNIERS, P. *Les polices en Belgique : histoire socio-politique du système policier de 1794 à nos jours*. Bruxelles. 1991. 66.

⁸² 'De Drankenwet' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 23.

problem but not the causes. Not the influential brewer or distiller, but the small pub landlord and his or her customers were duped.⁸³

The discussions in the *Commission du Travail*, and the debates in parliament, and the passing of the law on drunkenness did lead to one important outcome. After the political turbulence, that provoked the discussions, the issue of drunkenness was increasingly considered as one of major importance, connected unquestionably to ideas about the working classes and their physical and moral state. A medicalised discourse on the relation between drink and the 'dangerousness' of the working classes became officially endorsed.

c. Remedying dangerousness: 1887-1914

That the authorities in their rhetoric and the traditional political parties in their propaganda so immediately made socialists out as drunkards, was not unrelated to the policy on drinking the socialist party itself had initially endorsed. Unlike their political opponents, in the 1880's, the early socialists had not taken a stance against alcohol abuse and had not tried to promote moderation or abstinence, insisting that a glass now and then was the right of the workers, for whom it was the only form of distraction. They believed that the worker had the right to his drink, a strategy delivering them many votes in the earlier years.⁸⁴ The bourgeois parties' zeal to impose moderation illustrated for the socialists their project to undermine the worker's identity. Singer Karel Waeri

⁸³ BRUYNEEL, T. *Historische situering en analyse van politieke aspecten in het oeuvre van de negentiende-eeuwse Gentse volkszanger Karel Waeri*. Licentiaatsverhandeling, Universiteit Gent. 2002. http://home.planetinternet.be/~sintlod9/karel_waeri/karel_waeri_deel_4_a.htm

⁸⁴ CRISPEELS, *De strijd tegen het drankmisbruik in België, eind 19e begin 20e eeuw*. 60.

condemned the hypocritical attitude of the bourgeoisie against worker's drinking in an angry song against child labour and the hypocrisy of the bourgeoisie.

O rich men, all your days are dedicated to wealth. And when the worker, before his industry, drinks a pint of beer, sometimes, this you cannot support. And you squander the riches won with sweat and blood by those who slave for you.⁸⁵

This condoning of the consumption of alcohol was, however, written out the official socialist party-line with the coming to power in the party of Emile Vandervelde. Vandervelde stressed the importance of counteracting the poor public image of the socialist movement, endlessly associated with revolution, drunkenness and irrationality. During his entire political career, rather than supporting drink as a prerogative for the workers, Vandervelde insisted on an organised fight against alcoholism as essential in the war against capital. He wanted to persuade the workers that heavy drinking confirmed a wrong capitalist system whereby bourgeois brewers and distillers exploited the drinking working class. Also, workers' self-respect, so much needed for their political awakening, was completely annihilated by excessive drinking habits.

Vandervelde depicted the bourgeois as hypocrite drunkards themselves and he compared their attitude towards alcoholism with their outlook on prostitution.⁸⁶ Although they scorn the prostitute, bourgeois men still believed that the institution was necessary for the existence of the bourgeois marriage. In the same way, said Vandervelde, they hate the drunkard, but his drinking is necessary for the continuance

⁸⁵ WAERI, P. 'Geene scholen meer!' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 53.

⁸⁶ VANDERVELDE, *Le parti ouvrier et l'alcool*. 4. & VANDERVELDE, E. *La lutte sociale contre l'alcoolisme*. Bruxelles. 1899.3.

of capitalism itself: by drinking the worker numbs himself for his real misery and is incapable of revolt.⁸⁷ In 1898, Vandervelde founded within the Party a 'Socialist League against Alcoholism'. The motto of his new organisation was 'through the book against alcohol'. While praising the Belgian socialist workers' remarkable organisational and political strength, he denounced their lack of literacy and reading skills and their excessive drinking.⁸⁸ Inspired by the viewpoints of the teetotal leaders of British trade unions, Vandervelde pled, unlike the bourgeois anti-alcohol leagues who championed moderation, for complete abstinence⁸⁹

Emile Vandervelde was eager to use contemporary scientific and medical arguments to add strength to his case, like the claim of 'hereditary degeneration'. But, as Brice De Ruyver pointed out, what Emile Vandervelde meant when he used the term 'degeneration' remained unclear. He hinted at it as effected by the debased semi-criminal environment in which children of drunken parents grew up.⁹⁰ *Milieu* necessarily had to be more important than biology within a degenerationist concept compatible with anticipated social change, which was fundamental to the ideas of socialism. Belgian socialist heroes were often described or depicted themselves as being brought up under miserable circumstances, suffering under the hands of a drunken father. They themselves in their turn, having found redemption in socialism, would have forsaken all alcoholic drink. The figure of the drunkard drowning his problems in drink, terrorising his family and squandering all his money belonged to an old time before the coming of

⁸⁷ VANDERVELDE, *Essais socialistes: l'alcoolisme, la religion, l'art*. 89.

⁸⁸ VANDERVELDE, *La lutte sociale contre l'alcoolisme*. 1.

⁸⁹ DE RUYVER, B. 'De alcoholwet Vandervelde in historische en ideologisch perspectief.' *Tijdschrift voor sociale wetenschappen*. XXVII, 1982. 342-369.

⁹⁰ DE RUYVER, 'De alcoholwet Vandervelde in historische en ideologisch perspectief.' 345.

socialism, when their social environment determined workers.⁹¹ Although Vandervelde agreed with most other socialists that the best way to attack alcoholism was to alleviate the suffering of the workers, he did not believe fairer distribution of wealth alone would make alcoholism disappear, a claim he verified by referring to the excessive drinking that took place among the bourgeois itself.⁹² According to the new gospel of pragmatic socialism, honest workers had to emancipate themselves and through self-respect and solidarity overcome their miserable conditions.

The change in tactic of the socialist campaigners towards drinking and the working class matched the model of moderate reform-socialism, of social-democracy, that party leaders like Emile Vandervelde embodied.⁹³ Moderation was the key word for those socialist elites, emanating from a bourgeois liberal background.⁹⁴ Moderation led the party indeed ultimately to political success as socialist pressure ensured the introduction of a diluted version by plural voting of general franchise for men in 1893. This meant that every man over 21 could cast a vote, but those with money and qualifications could claim two or three votes. In spite of these restrictions, one and three quarters of a million new voters were added to the electorate and Emile Vandervelde became one of the 28

⁹¹ E.g. the biography of Karel Waeri and Pol de Witte WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 4. & DE WITTE, P. *Alles is omgekeerd: hoe de werklieden vroeger leefden (1848-1918)*. Leuven. 1986.60.

⁹² unlike other socialist leaders, like Domela Nieuwenhuis in Holland for example. DOMELA-NIEUWENHUIS, F. *De l'alcoolisme* Paris. 1889. 225. & VANDERVELDE, *Essais socialistes: l'alcoolisme, la religion, l'art*. 57.

⁹³ POLASKY, J. L. *The democratic socialism of Emile Vandervelde: between reform and revolution*. Oxford. 1995. 33.

⁹⁴ LIEBMAN, M. *Les socialistes belges 1885-1914: la révolte et l'organisation*. Bruxelles. 1979. 50-54.

socialist deputies who had won now for the first time a seat in Europe's most bourgeois parliament.⁹⁵

Political success was the aim of another emancipatory movement that also took on the fight against alcohol. Like the socialists who had moulded anti-alcoholism into an essential aspect of their programme, the problem of male working class drunkenness and how to combat it, equally contributed towards the formation of an identity for the early feminist movement, organised in Belgium in the last decade of the nineteenth century. Anti-alcohol discourse was at the heart of the propaganda of early Belgian feminism. The early feminists were liberal bourgeoises and also their movement was moderate, as it fought for control over the domestic space insisting that women's natural principal role, as mother and wife, needed protection.⁹⁶

In the campaign against alcoholism the feminists could assert their importance as protectors of the family and the race and their 'natural' skills as moralisers and educators. Women were considered experts in dealing with drunkards, because, according to feminist campaigner Marie Parent, they were to be treated as 'children and lunatics, with gentleness and firmness'.⁹⁷ The feminists founded in 1899 their own temperance society: the *Union des femmes belges contre l'alcoolisme* with its aim to protect women of the people against the negative effects of the social plague that was

⁹⁵ VANDERVELDE, E. *Souvenirs d'un militant socialiste*. Paris, 1939. 46. & GERARD, E. & VOS, L. *Hedendaagse geschiedenis*. Leuven. 1995. 123.

⁹⁶ DE WEERDT, D. *En de vrouwen? Vrouw, vrouwenbeweging en feminisme in België. (1830-1960)* Gent. 1980. 75.

⁹⁷ PARENT, M. *Le rôle de la femme dans la lutte contre l'alcoolisme* Bruxelles. 1890. 37.

alcoholism.⁹⁸ As for the socialists, in the anti-alcoholic feminist discourse, it was always the drinking of the men of the lower classes that needed to be countered. In a widely distributed propaganda brochure aimed at working class women, Marie Parent urged them not to marry a man with a soft spot for drink. Women would not only have to put up with the violence perpetrated by drunken husbands, but would also suffer for her children, 'because vices are hereditary and the father's bad example will be a great danger to them.'⁹⁹ In order to keep husbands from taking to drink Parent offered tips on how to excel in housekeeping so that husbands would stay home rather than go to the bar.

At the end of the 1890's the issue of votes for women was only addressed very occasionally and cautiously, as there was not even suffrage for working class men. But arguments to grant votes to women emerged within debates on alcoholism. For feminists, as for socialists, the anti-alcohol campaign was a route towards political changes, campaigning and lobbying for worker's and women's political rights. To combat drunkenness, the environment needed to change, a reform to be effected by the workers themselves, supported by the moral suasion of their wives, who hereby could emancipate themselves as well.¹⁰⁰

The Catholic reaction to those political transformations was one of 'change in order to preserve', an attitude reflected in their stance on drinking. Catholics had taught moral and Christian values from the pulpit and in the classroom: temperance being one of

⁹⁸ MATKAVA, *L'Union des Femmes Belges contre l'Alcoolisme. 1899-1951: de la lutte antialcoolique aux militantisme féminite et pacifiste.*

⁹⁹ PARENT, *Le rôle de la femme dans la lutte contre l'alcoolisme* 8.

¹⁰⁰ e.g. Louise Van den Plas in *Het volksgeluk*. november 1911. 1.

those. As part of their battle with the liberals for the rights on providing education, Catholic governments would pass legislation on temperance teaching in primary schools, and so, ironically, Belgium became one of the first European countries to provide specific anti-alcohol classes on the curriculum.¹⁰¹ But generally, before the end of the century, as the liberals, subsequent Catholic governments, remained reluctant to take legislative action about the sale and consumption of alcohol, for the same political and economical reasons.¹⁰² The rise of the socialist movement and its impact on the workers, previously obedient under Catholic guidance, however, would lead the Catholics finally towards social action. The Catholic party tried to lure people back to their camp by setting up their own organisations of mutual assistance for example and in last years of the nineteenth and the first decade of the twentieth century, they also grasped the power of sobriety within the worker's political awakening. They set up temperance groups and moulded the old moral Catholic anti-alcohol discourse into new shapes, to enable it to compete with the arguments of its socialist political enemies.¹⁰³

One way, in which Catholic social campaigners modernised the old emphasis on the individual moral guilt of the workers to involve wider social responsibility, was by appealing to prevailing ideas of heredity and racial degeneration. Catholics were keen to adopt medical ideas of heredity into their new anti-alcohol discourse, connecting notions of heredity to Christian notions of virtue and vice. Jos Lemmens, a progressive priest, active in Catholic workers' organisations, published a collection of sermons to help

¹⁰¹ DE VROEDE, M. 'Primary education and the fight against alcoholism in Belgium at the turn of the century.' *History of Education Quarterly*. XXV, 4, 1985. 483-497. & *B.S.M.B.T.* sept 1902, 405.

¹⁰² DECLERCK, *Génèse du discours anti-alcoolique en Belgique 1830-1970*. 90. n.

¹⁰³ LEMMENS, J. *L'alcoolisme et la réorganisation ouvrière*. Liège. 1907.

clerics with anti-alcohol education of the masses. It suggested priests to preach to their congregation:

Do not ignore that mysterious law that is called the law of heredity, in virtue of that law [...] the child inherits from his parents or the germs of good or the taints of evil, of passion of vice. Modern science has shown that this law finds its application particularly within the family of the alcoholic. The children of the drunkard are born with unfortunate predispositions, both in regard to their bodies as their souls. Tuberculosis, anaemia, idiocy, scrofula, falling sickness spy upon its little body, while at the same time predisposition to crime, propulsion towards immorality, lack of character and violence of the passions spy on its soul! ¹⁰⁴

Also through their iconography, Catholic temperance movements mirrored ideas of good versus evil, or sober versus drunk to images of health and sickness and weakness in the offspring. A propaganda postcard illustrates this dichotomy:

¹⁰⁴ LEMMENS, J. *Sermons de tempérance et documents pouvant être utiles aux prédicateurs de la tempérance*. Liège. 1906. 36.



6. Postcard. Collection *Le Bien Social* No. 15. 1902.

The sober worker fathered a healthy looking child, his family is happy and the tools of his carpenter trade besides him reveal a Christian connection with the Holy Family. In the picture next to it, the idle drunkard, without working tools but with an empty bottle in the hand instead, has produced an emaciated misshapen baby, scary to look at. Heredity fitted in well within a political Catholic framework. Medicine and science were powerful and convincing new authorities providing unavoidable dogmatic 'truths'. The individual vice, going back to the original sin, which the Church needed to stress, could through ideas of heredity, become a 'social' issue.

By the end of the nineteenth century, the traditional political parties had no choice but to hear the voice of the working classes and to accept universal suffrage as an unavoidable evil. The absurd panic of the first socialist uprisings made place for complacency as the bourgeois was left with no other options than to accept the new way of things. With it, their stress on alcohol and drunkenness as a cause of the workers' defiance weakened as

well. General strikes and demonstrations in the campaign for general franchise better organised by the now strong socialist party, who now officially and openly condemned alcoholism. They were felt to be much more subdued than the drunken *jacquérie* of 1886. The minor unrest that did happen this time, was, according to Dr. Bienfait not due to excessive alcohol-abuse, but to the racial inborn traits of the protesting workers and the natural impossibility to

contain Walloon exuberance or Flemish stubbornness, with some of them [being] of feeble intellectual development, with mental defects [*tares*], with little moral education.¹⁰⁵

This reaction, embodying the mood of the bourgeois, forced to accept the worker's political and social presence, betrays a deep feeling of fear and distrust. The excessive public drinking that had made the workers so different and dangerous in 1886, had only seemingly disappeared. It now had become lodged within the biology of the 'race' of the workers and had through heredity and degeneration, turned into a silent but unavoidable threat to the social and physical health of the nation.

The 'internalisation' of drunkenness and its hereditary fatal outcome, was at the heart of the discussions leading in the last decades of the nineteenth century towards much awaited social legislation. Most of these changes were introduced by Jules Lejeune, minister of justice in between 1887 and 1894 and were inspired by the thinking of his close advisor, Adolphe Prins, who never held a direct political post himself but who became a key character in late nineteenth century Belgian social politics. Prins, professor in criminal law and General Inspector of Prisons, was one of the founding thinkers of the

¹⁰⁵ B.S.M.B.T. juin, 1913. 181.

new 'science' of 'criminology'.¹⁰⁶ Combining ideas of criminal law and psychiatry, he introduced the idea of the 'social defense', asserting that the social body needed to be protected from the malign influence of dangerous individuals.¹⁰⁷ Degeneration was for Adolphe Prins the source of all evil:¹⁰⁸

Our civilisation keeps in its middle an inferior type of humanity. These people can become dangerous, when their degeneration is coupled to social misery. Therefore we stand for a dilemma: to sacrifice the degenerates to the interest of the 'superman', or to conserve them, but then to protect them for the benefit of all. Because modern civilisation quite rightly would revolt against definite elimination, the only thing left is social preservation.¹⁰⁹

For the term 'superman', Prins was without doubt indebted to Nietzsche, who had equally accepted the implications of current criminological and eugenic theory and pushed them towards what Daniel Pick called an 'extreme provocation'.¹¹⁰ For Adolphe Prins, this extreme provocation was not a philosophical testing of the boundaries of a medical theory with social implications, but a valid foundation for practical measures. He had already taken the political stage as specialist in the *Commission du Travail* in 1886, arguing for the penalising of public drunkenness as the 'genesis of all crimes'. The notion

¹⁰⁶ NYE, R. *Crime, madness and politics in modern France: the medical concept of national decline*. Princeton. 1984. 97.

¹⁰⁷ VAN DE KERCKHOVE, M. 'Discours juridique et discours psychiatrique. Aux sources de la loi de la défense sociale.' *Droit et société*. 3, 1986. 279-302.

¹⁰⁸ TULKENS, F. 'Un chapitre de l'histoire des réformateurs. Adolphe Prins et la défense sociale' in TULKENS, F. ed. *Généalogie de la défense sociale en Belgique (1880-1914)*. Bruxelles. 1988.

¹⁰⁹ PRINS, A. 'Dégénérescence et Criminalité' in *Revue de droit pénal et criminel*, 1909. 97-120.

¹¹⁰ PICK, D. *Faces of degeneration: a European disorder, c. 1848 - c.1918*. Cambridge. 1989. 226. & LABRIE, *Zuiverheid en decadentie. Over de grenzen van de burgerlijke cultuur in West-Europa. 1870-1914*. 156-187.

of 'social defense' demanded that dangerous alcoholics would be eliminated from society before their pernicious habit or indeed, inborn defect, could manifest itself.

A deep-seated contradiction between moral language of responsibility and a biological language about inborn defects of possibly dangerous individuals permeated the text of a new law on vagrancy, presented by Jules Lejeune in 1892. Vagrants, to be arrested by the police, had according to the minister, to be divided into two categories. Apart from the 'unfortunates' who could not work because of illness or old age or forced unemployment, a second much larger group was identified of those who did not want to work: 'persons, who, owing to idleness, drunkenness or immorality, live in 'a state of vagrancy'.'¹¹¹ Within the dualism between the 'good' and the 'bad', ever more polarised and represented as a moral choice, drunkenness became now singled out independently as a condition responsible for anti-social behaviour and liable for punishment without being necessarily 'disorderly' as was stipulated in the law on public drunkenness.

Based on this law, the poor alcoholic whose drunkenness was located outside the endorsed sociable sphere, who lived as 'a vagrant', was often time and again arrested. If not sent to prison or the *maison de travail* as happened mostly in the cities, in rural Flanders destitute drunkards would as a rule be forced to work in the new purposely built *Colonies agricoles de bienfaisance* of Hoogstraten, Wortel and Merxplas. Many arrested as vagrants and incarcerated in the colonies were people with long lasting drink problems. By the turn of the century, three quarters of the 6000 detained in Merxplas where there already for at least the fourth time.¹¹² Most observers, initially interested in

¹¹¹ DEISS, E. *Études sociales et industrielles sur la Belgique. Notes de voyage*. Paris. 1900. 181.

¹¹² VAN ISACKER, *Mijn land in de kering: 1830-1980*. 92.

the experiment were, after visiting, no longer convinced of its efficiency.¹¹³ Seebohm-Rowntree called the inhabitants of the agricultural colonies 'human wreckage' and instead of offering rehabilitation he saw the institutions as 'permanent asylums for those ruined by drink, for the indolent, the incapable and the old.'¹¹⁴

But the locking away of unwanted alcoholics did in effect not seem to be very effective, since official consumption statistics continued to show a steep rise in the sale of alcohol.¹¹⁵ The problem of drunkenness and dangerousness still continued to haunt bourgeois political minds and in 1895 Jules Lejeune, who had now become senator, chaired a Government Commission to discuss the problem once more. Fifteen commissioners, among whom were seven medical experts this time – most of whom active in the temperance movement – met 41 times between April 1895 and June 1897 and over this time they analysed endless statistics, graphs, and 'scientific' facts showing the irrefutable relationship between drunkenness and all kind of social evils. The commission unanimously adopted the position that 'alcoholism of the parents transmits to the children and hits [*frappe*] the offspring with a hereditary taint. [*une tare héréditaire*].'¹¹⁶ Their final report listed how alcohol, through heredity had contributed to an increase of madness, dementia, simple-mindedness, epilepsy and many other diseases of the body, but mostly afflictions of the mind. It also revealed the enormous influence alcohol misuse was alleged to have on poverty, criminality, immorality and suicide. A second section of the report presented possible solutions for the problem and

¹¹³ e.g. PRINGLE, J. C. *The Belgian detention colony at Merxplas*. S.I. 1909.

¹¹⁴ SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 489.

¹¹⁵ SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' 233.

¹¹⁶ MINISTÈRE DE L'AGRICULTURE *Commission d'études relatives à la question de l'alcoolisme. 1895-1897. Rapports généraux*. Bruxelles. 1897. 20.

at first sight not much had changed since the time of Frère-Orban. The commission suggested a programme of alcohol-education in schools and government support for private initiatives in the shape of temperance societies. State intervention into the production and sale of alcohol was, as expected, not mentioned as an option, although the report did recommend a significant rise of taxes and the licensing of bars. But most remarkably and new, the commission of 1895-7 also proposed the incarceration 'for a period considered necessary for their recovery of accused drunkards, judged dangerous.'¹¹⁷

After the Committee had presented its findings, its president Jules Lejeune again proposed, this time in the senate, an act for the 'incarceration of dangerous lunatics'. It recommended the establishment of special asylums for criminal lunatics. He had already proposed this act in 1890, but then it had failed to reach a second reading. The act had been supported strongly, from its initial stages, by eminent psychiatrists and the minister would say later that 'the measures presented in my bill were almost dictated by the *Académie royale de médecine*.'¹¹⁸ Now, in 1897, Lejeune had added a category of

¹¹⁷ MINISTÈRE DE L'AGRICULTURE, *Commission d'études relatives à la question de l'alcoolisme. 1895-1897. Rapports généraux*.102 & SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' 233

¹¹⁸ *Bulletin de l'académie royale de médecine de Belgique*. XII, 1889, 554. & B.S.M.M.B. XCII, juin 1899, 209-221. & *Annales Sénat*. Séance du 23 févr. 1899, 115. & VAN DE KERCKHOVE, M. 'L'organisation d'asiles spéciaux pour aliénés dangereux.' in TULKENS, F. ed. *Généalogie de la défense sociale en Belgique (1880-1914)*. Bruxelles. 1988. 125.

individuals to the list of persons suitable for forced incarceration in special institutions that had not been there seven years earlier: alcoholics [*des alcoolisés*]¹¹⁹

The *alcoolisés* that were to be sent to special asylums were those who had been acquitted of a crime because of 'legal irresponsibility' due to chronic alcoholism. It would also concern individuals who had been found guilty of serious crimes whilst in a state of drunkenness. The category moreover would include those who had incurred four sentences for public drunkenness within a period of four years.¹²⁰ The proposal was, not unexpectedly, severely criticised as infringing the personal freedom and was rejected in 1899. *Alcoolisés* were still a target-group when the proposal for special asylums for criminal lunatics was, fruitlessly again, put before the house a third time, in 1909, proposed by a group of 6 members of parliament, among whom the socialist Emile Vandervelde.¹²¹ When the law finally passed, only in 1930, the category *alcoolisés* had disappeared again and the 'official' 'law on social defense' would only include 'abnormals, habitual delinquents and criminal adolescents'. Alcohol once more had proved a subject too ambiguous to deal with as an indiscriminate 'condition'.

But precisely because excessive drinking could become a vice of 'the other', drunkenness was also a useful subject for straightforward political propaganda, which took on aspects of morality or biology according to the agenda to be defended.

¹¹⁹ 'Proposition de loi portant organisation d'asiles spéciaux pour l'internement et le traitement des aliénés dits criminels, des aliénés dangereux, des alcoolisés et les détenus atteints d'une maladie grave'. *Annales Chambre*. Séance du 9 février, 1897. 315.

¹²⁰ VAN DE KERCKHOVE, 'L'organisation d'asiles spéciaux pour aliénés dangereux.' 121-122.

¹²¹ 'Proposition de loi portant organisation d'asiles spéciaux pour l'internement et le traitement des aliénés dits 'criminels', des aliénés dangereux et des alcoolisés.' 1908-9. 150.

d. Telling the story of gin and the Congo

Unravelling ideology through a study of languages of drunkenness can be demonstrated by means of the peculiar story of alcohol in the colony and the debates surrounding it. In spite of an acute lack of evidence on the subject, the remarkable and intricate story of 'gin in the Congo' illustrates another segment of a multitude of representations of alcohol in Belgium. Even a small selection of texts on alcohol and the colonies, can provide an insight into how representations of drunkenness pragmatically contributed to, while at the same time being influenced by ideology. The unfinished story is then here an example of how medical, political and broader cultural ideas worked together and how racialised and classed language on drunkenness overlap.

While at home class tensions soared, the ambitious businessman-king Leopold had been recognised in 1885 as the king-owner of *l'État indépendant de Congo*.¹²² In Leopold's economic venture, Congo was a new market for imported Belgian produce, like spirits. Consequently he forbade the natives inhabitants to brew their own 'indigenous beer' and Belgian gin was exported in vast amounts in its stead, alcohol often of very bad quality, which had proved difficult to sell at home.¹²³ Britain and the USA severely criticised Leopold's politics of exploitation of the colony and the appalling practices of Belgian companies enslaving the indigenous population.¹²⁴ They condemned the system

¹²² HOBBSBAWM, *The age of empire, 1875-1914*. 66.

¹²³ CAUDELIER, E. *Le gin et le Congo*. Bruxelles. 1895.5. & GRENADE, I. *Codes et lois du Congo Belge*. Bruxelles. 1923. 519. & TROLLI, G., VANHOVE, J. and MARQUET, A. 'Exposé de la législation sanitaire du Congo belge et du Ruanda-Urundi.' in *Les Nouvelles. Corpus Juris Belgici. Tome III. Droit Colonial*. Bruxelles. 1938.603.

¹²⁴ EWANS, M. *European atrocity, African catastrophe. Leopold I, the Congo Free State and its aftermath*. London. 2002. 157.

whereby part of the wages of the railway workers for example, were paid out in gin and arrangements sanctioning Belgian colonials to pay for local produce with alcohol.¹²⁵ When in 1890, the import and sale of alcoholic liquors was officially limited at an international anti-slavery convention held in Brussels, this ban only affected those regions of Africa where the use of such liquors was not yet established. This was clearly not the case for Belgian Congo.¹²⁶

Gradually, also at home, the seriousness of Leopold's misconduct rang through and disapproval about the use of gin as an intrinsic part of the colonial efforts was expressed.¹²⁷ The 'racialised' language in which the native's abuse of alcohol was discussed, shows many parallels with the 'classed' language used at home about the worker's inherent drunkenness. Doctor and temperance campaigner Alphonse Moëller had already asked in 1886: 'Is it not painful to think that we are to send the pioneers of civilisation, but that they carry in their luggage barrels of 'eau de vie' and gin?'¹²⁸ It was generally assumed that the indigenous population, by its biological constitution and 'unchained passion', like the workers at home, was more susceptible to alcoholic drinks, a viewpoint that would worsen Leopold's crime.¹²⁹ For singer of satirical songs Karel Waeri the contradictions of gin in the Congo provided abundant inspiration. 'In his first

¹²⁵ CAUDELIER, *Le gin et le Congo*. 12-13.

¹²⁶ CAUDELIER, *Le gin et le Congo*. 10. & M.H. 23, 2, févr. 1907.

¹²⁷ e.g. ANON. *Quelques vérités sur le Congo*. [s.l.]. 2004. & ANON. *Catéchisme du Congo, par un ami de l'ouvrier*. [s.l.]. 1900. & VAN PARYS, L. *Les Hontes de la Civilisation au Congo Belge*. La Louvière. 1899.

¹²⁸ As quoted in NYS, 'De ruiters van de Apocalyps. 'Alcoholisme, tuberculose, syphilis' en degeneratie in medisch België. 1870-1940.' 9.

¹²⁹ CAUDELIER, *Le gin et le Congo*. 19. & GAUSSIN, *Le fléau moderne : traité complet médico-moral de l'alcoolisme ; causes, effets, remèdes*. 48. & VAN DEN CORPUT, E. *L'alcoolisme, l'hérédité et la question sociale*. Bruxelles. 1895. 32. & BARELLA, H. *Les alcools et l'alcoolisme*. Bruxelles. 1879. 137.

lesson a savage does not learn how to honour God', he sang about the missionary effort of Belgian Catholic colonisers, 'but the bottle of liquor.'¹³⁰

Critical and controversial liberal writer Cyriel Buysse, added his voice to the protests. In the novella *De Zwarte Kost*, he wrote about a bored inhabitant of a lethargic Flemish village, Massijn, who travelled to the colony in search of adventure. There he discovered that the European settlers misbehaved badly, giving themselves over to alcoholic orgies with local women. Although he fiercely disapproved of such practices, the influence of the colonial environment also drove Massijn to drink and in his turn he also went 'native', after which he died from a sexually transmitted disease.¹³¹ Buysse held the tropical colonial environment liable for the 'pollution' of Massijn's vigorous moral and physical European health, just as socialists would blame the appalling living and working conditions of the exploited working class for undermining the workers' vigour. In both cases alcohol was seen as the accelerator of the demise. And similarly to what had happened in relation to the 'question of labour' at home, in the case of the Congo, politicians, mostly socialists and progressive liberals, added always louder voices of protest.¹³² They pressurised the government to urge the King to take measures to limit the import of alcoholic drinks into the colony, or as it was mentioned by a socialist delegate in a parliamentary debate, to put a halt to the 'poisoning [of] the negroes' .¹³³

¹³⁰ 'De Beschaving der Wilden' WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 149

¹³¹ BUYSSE, C. 'De zwarte kost' (1898) in *Verzameld werk*, IV, Brussel, 1974. 405-455.

¹³² POLASKY, *The democratic socialism of Emile Vandervelde: between reform and revolution*. 53-82.

¹³³ *Annales Chambre*. Séance du 10 Mars, 1896, 127.

Finally, in 1898, legislation was to provide an answer to this pressure. But on all accounts the specific measure that was decided seemed meaningless: a law was passed that forbade the consumption of absinthe in the entire colony.¹³⁴ Absinthe was, however, not widely drunk in Belgium, let alone in the colony. It was gin and palm-wine that created so much tragedy, not absinthe.

Nevertheless, while in practical terms this measure seemed completely absurd, metaphorically, it made perfect sense. The drink absinthe and the colonial experience carried similar meanings. Both the 'savage' indigenous drunkard to be dealt with in the colonies and the absinthe-drinker, considered a potential problem at home, signified profound, clear, and potentially dangerous 'otherness'. The encounter with the absinthe drinker at home and the native drunkard invoked meanings of degeneration and possible racial decline. Both ideas were contrary to what 'civilisation' stood for and what an ordered customs of society meant.

Liesbeth Nys has told the story of how, after the experiment in the colony, a ban on the professed hazardous anise liquor in Belgium, followed in 1906, under pressure of the medical establishment.¹³⁵ In sharp contrast to the lengthy discussions over the law on public drunkenness, the ban of absinth both in the colony and at home was passed at once unanimously without any serious debate. The legislation to ban absinthe served to demonstrate interest and goodwill on the part of the Belgian government to tackle issues at the forefront of the medical and wider public debate: the preoccupation with the growth of alcoholism and madness and the perceived decline of the race. Government

¹³⁴ TROLLI a.o., 'Exposé de la législation sanitaire du Congo belge et du Ruanda-Urundi.' 603.

¹³⁵ NYS, 'Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' 411-436.

now could pride itself on listening and acting upon those concerns of 'social defense' related to drunkenness. In the colony the measure could even serve to silence two expressed worries. While it outlawed a drink that was perceived especially dangerous for racial health, at the same time it answered criticisms of the paradox of the civilisation of the 'dark races', by selling them alcohol. And it was convenient practically: since absinthe was hardly produced, sold or drunk in Belgium, the overall implications of the law were very limited. Therefore it could not cause offence to anyone with a political or economic interest in its sale and production, a concern that had otherwise prevented the ruling bodies in Belgium to tackle drinking through legislation. In fact of course, nothing would change. Contemporaries could see this too and the regulation was ridiculed. One publication wrote that Belgium should receive as much congratulations for the passing of this law 'as a eunuch because he stays chaste'.¹³⁶

e. Epilogue: the First World War and the Vandervelde law

The First World War was a break point, not only for the general history of Belgium but also specifically for the history of alcohol, as it was in France, Britain and the US.¹³⁷ As in most countries at war, in Belgium, very drastic action was taken as a result of the shortage of raw materials. The government strictly controlled the production of alcohol and its consumption was forbidden in non-occupied territory. Psychiatrist Auguste Ley

¹³⁶ *La Revue Vinicole* as quoted in NYS, "Groene toverdrank of gebottelde epilepsie?" Absint in België omstreeks 1900.'435.

¹³⁷ NOURRISSON, *Le buveur du XIXe siècle*. Ch. 5. 287-306. & GREENAWAY, *Drink and British politics since 1830: a study in policy making*. ch. 6. 91-113. & GUTZKE, D. W. 'Gender, class, and public drinking in Britain during the First World War.' in BLOCKER, J. S. & WARSH, C. L. K. eds. *The changing face of drink: substance, imagery, and behaviour*. Ottawa. 1997. 291-319.

observed that, as a result, during the war the number of people suffering from alcoholic madness had seriously decreased. After the war, Ley remained at the forefront of a campaign, which procured that this emergency legislation became more or less permanent once the war was over.¹³⁸

From 29 August 1919, socialist minister of justice Emile Vandervelde forbade at once all the sale of small amounts of alcoholic beverages. This was certainly a drastic shift certainly compared with the unwillingness to regulate the sale of alcohol in the years before.¹³⁹ The law forbade, in theory, the sale and the consumption of strong liquor in public places, thus including bars. To prevent alcohol- abuse from shifting from public places to private homes, it quadrupled the excises on strong liquor. Shopkeepers could only sell alcohol in quantities of minimum two litre in order to make the purchase too expensive for the workers' budget.

Another 10 years later, in 1929, alienist Auguste Ley again, concluded that the incidence of madness related to drunkenness had once more decreased dramatically after the war.¹⁴⁰ Emile Vandervelde himself noted in a report on the success of his law in 1923, that number of vagrants locked up in the *colonies* and convictions for public drunkenness in the Belgian prisons had declined: noticeably while there had still been 625 drunkards detained in Vorst in 1912, none were counted in 1919 and a year later only 9.¹⁴¹

¹³⁸ LEY, A. *L'aliénation mentale et l'alcoolisme à Bruxelles pendant la guerre*. Bruxelles. 1919.

¹³⁹ DE RUYVER, 'De alcoholwet Vandervelde in historische en ideologisch perspectief.' 342.

¹⁴⁰ LEY, A. *La loi belge de 1919 contre l'alcoolisme et ses résultats*. Paris. 1929.

¹⁴¹ DE RUYVER, 'De alcoholwet Vandervelde in historische en ideologisch perspectief.' 365.

The First World War and the Law Vandervelde can be seen as marking the end of an era where alcohol, representing madness and degeneration, embodied the social threat of an irrational working class. Instead liberal ideologies had shifted and reconstruction and social democracy were on the agenda now.¹⁴² The story of drink and politics, shows how excessive alcohol drinking and its condemnation provided ideologies with a framework within which to construct 'the other': the drunk and thus to construct their own political identity and to promote its claims. Issues of biology merge with the discourse of moral failure when taken on and interpreted by different ideologies in the last decade of the nineteenth century and the beginning of the twentieth.

¹⁴² GERARD a.o., *Hedendaagse geschiedenis*. 154.

II. Drink and the doctors

In Catholic Belgium, excessive drinking and habitual drunkenness were condemned as a vice. Once one yielded to the temptation, faith and willpower, were the solutions religion offered to combat the immoral urge to drink. In the nineteenth century, medical specialists increasingly took the problem of drunkenness on as their area of expertise. The 'medicalisation of drunkenness' has been mainly interpreted as a move in the second half of the nineteenth century, whereby excessive drinking was taken out of the realm of religious morality where it had lingered for centuries, and was introduced to the positivistic world of medicine. This process formed part of a wider process of 'medicalisation' whereby doctors forged themselves through expansion of their expertise as a hegemonic group in society. Medical practitioners, in nineteenth century Belgium liked to represent themselves as promulgators of science and truth and they were often important establishment figures, whose view on all substantial business was held in high esteem.¹ By calling the increasingly powerful body of medical professionals, 'the new confessors', Karel Velle, following Michel Foucault, has argued that doctors generally assumed social roles performed in earlier times by the clergy.² Medical discourse would transform the drunkard from a morally reprehensible person into an ill person. Peter Scholliers has argued that by changing *ivrognerie* into *alcoolisme* and focussing on the 'scientific' aspect of alcohol and on its clinical consequences, doctors would have

¹ NYE, R. 'Degeneration and the medical model of cultural crisis in the French Belle Époque.' in DRESCHER, S., SABEAN, D., & SHARLIN, A. eds. *Political symbolism in modern Europe: Essays in honor of George L. Mosse*. New Brunswick. 1982.21.

² VELLE, *De nieuwe biechtvaders: de sociale geschiedenis van de arts in België*. 25-32.

introduced 'medical' thinking about alcohol into the common sense language.³ In this chapter, I scrutinise the language those doctors used to talk about drunkenness, and argue that the medicalisation of drunkenness was a complex cultural event. Within the repositioning 'from vice to disease' other important shifts than the consolidation of the power and prestige of the medical profession, took place, and cultural notions of gender and social class allowed for overlapping, paradoxical and ambiguous interpretations on the nature of drink, on the nature of free will and responsibility. Drunkenness, as a changeable object affecting all classes of society, elicited different meanings and accordingly needed an explicatory model that could be equally flexible.

1. In theory: the medicalisation of drunkenness

The term 'alcoholism', coined by the Swedish doctor Magnus Huss 1849 to refer to excessive drinking as a disease, was already used by Belgian doctors since the 1850's.⁴ According to Alfred Bienfait, *chef-de-clinique* of the main hospital in Liège and one of the founders of the temperance movement in Belgium, the difference between *ivrognerie* and *alcoolisme* was that the first has always existed, but the second condition was new, and a result of the industrial production of cheap spirits, typical for the age.⁵ In the second half of the nineteenth century, medical practitioners published ever more texts on the 'scourge of drunkenness'. They produced so-called *manuels populaires*, handbooks written deliberately in 'simple language', aimed at the working classes. Based on unambiguous 'scientific' truths, they provided irrefutable information to educate the lower classes

³ see for Belgium: SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1840-1819.' 227-239. For England: JOHNSTONE, 'From vice to disease? The concepts of dipsomania and inebriety, 1860-1908.' 37-56. and for France and more in general: SOURNIA, *Histoire de l'alcoolisme*.

⁴ NOURRISSON, *Le buveur du XIXe siècle*. 177-179.& DECLERCK, *Génèse du discours anti-alcoolique en Belgique 1830-1970*. 60

⁵ M.H.Aout 1877. 287.

about the dangers of excessive drinking. It is questionable, nevertheless, if the intended audience would have ever read those 'hygiene' manuals.⁶ Not only were many Belgian workers illiterate or not interested in reading, certainly no health instruction booklets, but also, some contemporaries noted, they would be wary to follow up advice on how to live their lives offered by bourgeois, that same class that subjugated them and that they consequently mistrusted.⁷ Apart from these popular educational works, medical professionals also wrote on alcoholism aimed at colleagues and here the self-professed specialists on drunkenness often communicated their doubts, albeit 'between the lines,' about what constituted drunkenness and how it should be defined.

Because overall, in the growing body of medical texts on alcohol, doctors never employed one general term to refer to the problem of excessive drinking but instead employed an ever more specialised terminology.⁸ Medical professionals devised a wide vocabulary in order to construct different models of drunkenness, ranging from 'drunkenness' [*ivresse* and *ivrognerie*], 'alcoholism' [*alcoolisme aigu* and *chronique*] to 'delirium tremens' and 'dipsomania'. The meaning of these words was furthermore never consistent and often contradictory, as the terms in which drunkenness was debated always shifted.

⁶ see about working class reading culture III Drink in fiction. p. 246 – 251.

⁷ *Bulletin de la société médicale belge de tempérance*. 39, mars 1905, 140.

⁸ MADDEN, J. S. 'Substance use disorders. Clinical section.' in BERRIOS, G. E. & PORTER, R. eds. *A history of clinical psychiatry: the origin and history of psychiatric disorders*. London. 1995. 656-667. & DOWBIGGIN, I. 'Back to the Future: Valentin Magnan, French psychiatry and the classification of mental diseases 1885-1925.' *Social History of Medicine*. IX, 3 dec., 1996. 383-408.

For Mariana Valverde the instability of the discursive network shows a failure of the medical profession to consolidate their power.⁹ Drunkenness was indeed an ambiguous state, with aspects of free will and disease always intersecting, a state that was at all times difficult to explain and contain in language. Nonetheless, the ambiguous language could also indicate exactly the opposite: it can be seen as an essential mechanism and a necessary step towards the establishing of that power. The medicalisation process of drunkenness then is no longer to be understood as a transparent progressive movement whereby ideas of vice in the judgment of drunkenness were shed and taken over by scientific and therefore non-ideological assessment. Instead it becomes a means to delineate and negotiate the borders between acceptable and non-acceptable conduct, normal and abnormal behaviour, whereby the language of vice is contradicted but equally taken on, transformed and even proliferated into new medical terminology. The medical stance on alcohol, drinking, and drunkenness was always actively negotiated within existing narrative and popular knowledge on the qualities of alcohol, on what heavy drinking entailed, but also on how to cure it. The ambiguous language of drunkenness, written by medical practitioners with the pen of a dominant liberal bourgeois ideology, carried with it wider social meanings. It thereby constructed essential cultural dichotomies not only between morality and biology, or free will and determinism but also between for example the group and the individual, between men and women and upper and lower classes.

Peter Scholliers has situated drunkenness firmly within nineteenth century discourse of medicine, concluding that the construction of drunkenness as a disease coincided with the forging of professional identities. But in addition, different, new emerging

⁹ VALVERDE, M. 'Slavery from within: the invention of alcoholism and the question of free will.' *Social History*. XXII, 3, 1997. 255.

specialities claimed expertise on the subject. In the mid- nineteenth century those doctors who were interested in the problem of drunkenness were mostly medical men involved in matters of public health, so called 'hygienists'. Towards the end of the century, doctors studying alcoholism defined themselves mostly as specialists of mental illness, psychiatrists, who claimed expertise by constructing both madness and drunkenness as a disease.¹⁰ Ideas of heredity and degeneration found their way into the debates on alcoholism and drunkenness which were conducted before the First World War in circles of 'criminal anthropologists', followers of a discipline that added ideas of inborn criminal traits to psychiatry.

The course the medical debates on alcoholism followed over this period is illustrated by the changing emphases in the writings on alcoholism by Hippolyte Barella the most outspoken voice in the medical debates on alcoholism in Belgium from the late 1870's until his death in 1902. Barella was employed as a doctor in the medical service of the collieries of Mariemont and Bascou in Chapelle-lez-Harlaimont, a mining town in the industrial region surrounding Charleroi. The population of Chappelle had grown dramatically as a result of the expanding mining industry and its public services were few and insufficient. The miners, both men and women and also children working underground, lived in appalling conditions and Barella was especially worried about their excessive drinking habits. Barella was an important public figure in Chapelle, he was not just doctor, but also mayor of the town for most of the last half of the century. In

¹⁰ See for France: GOLDSTEIN, J. *Console and classify: the French psychiatric profession in the nineteenth century*. Cambridge. 1987. & POSTEL, J. & QUÉTEL, C. *Nouvelle histoire de la psychiatrie*. Paris. 1994. 266.

1895 he was elected president of the *Académie royale de médecine* of Belgium, an appointment confirming his professional authority.¹¹

In the late 1870's, Barella formulated concerns about *hygiène* and public health, providing the ideology for the first Belgian temperance organisation, *La ligue patriotique contre l'alcoolisme*, he set up in 1879. Its aim was to educate workers about issues of 'hygiene' and temperance. Then, in the later years of the century, Barella gradually adopted the discourse of the alienists, connecting drunkenness with madness and degeneration. Barella's initial optimism about the potential improvement of the condition of the miners through health-education faded and in the later years of the nineteenth century, he presented countless case-studies that were to prove that an excessive passion for drink was one of the features of the miner's uncivilised nature, passed on from generation to generation. And lastly, arguing for forced internment for alcoholics, in the 1890's, he spoke the language of the 'criminal anthropologists', translating an urge for drink not just to an inborn taint but linking it directly to criminal behaviour.

a. The hygienists

In the mid-nineteenth century Belgian doctors formed no closely-knit body and the Belgian *Académie royale de médecine* was only established in 1842 as an elite professional organisation.¹² In other European countries, in Britain for example, towards the second

¹¹ LÉBOUCQ, 'Barella' in *ACADÉMIE ROYALE DES SCIENCES DES LETTRES ET DES BEAUX-ARTS DE BELGIQUE Biographie nationale* Bruxelles. 1956., tome XXIX, 202-3.

¹² VELLE, K. 'Medikalisering in België in historisch perspectief, een inleiding.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. LXIV, 1986. 266 .The Belgian Académie was modeled on the French example, where a medical academy was already founded under the reign of Louis XVI. RAMSEY, M. 'Public health in France.' in PORTER, D. ed. *The history of public health and the modern state*. Amsterdam. 1994. 47.

half of the nineteenth century sanitarian reform and its influence on policy making had resulted in an expanding system of public health administered by government health officials.¹³ But in locally divided Belgium, no such provisions were taken by the central government and no systematic public health policy came into existence in the nineteenth century. In most small towns and in the countryside there were no provisions at all and often there was not even a doctor available. In 1880 there was only one doctor for the 3063 inhabitants of the industrial town of Seraing while in 1904, it was estimated that there were still less than 6 doctors per 10000 inhabitants on average in Belgium.¹⁴

Within the medical elite, the *hygiénistes*, formed a specialised group of doctors interested in the physical and moral conditions of the working classes, or *l'hygiène public* and they gathered statistical evidence on the unsanitary living conditions of the new urban workers, but also on what they called their 'moral state', which included drinking habits.¹⁵ Precursors in Belgium had been the doctors Joseph Mareska and Heymans, who examined in the 1840's for the first time the living situation of the people employed in the Ghent cotton mills.¹⁶ They condemned the workers' abuse of gin, which they

¹³ PORTER, D. 'Enemies of the race': biologism, environmentalism, and public health in Edwardian England.' *Victorian Studies*. XXXIV, 1991. 165. & SCHEPERS, R. 'Een wereld van belangen. Artsen en de ontwikkelingen van de openbare gezondheidszorg,' in NYS, L., DE SMAELE, H. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen. 2002. 200-218. & HOUWAART, E. S. *De hygiénisten: artsen, staat & volksgezondheid in Nederland 1840-1890*. Groningen. 1991.

¹⁴ ORIS, M. 'Hygiène publique et médicalisation dans une cité industrielle. Seraing au XIXe siècle et au début du XXe siècle.' *Revue belge de philologie et d'histoire*. LXXIII, 1995. 984. & KUBORN, H., DEVAUX, H. a.o. *Aperçu historique sur l'hygiène publique en Belgique depuis 1830*. Bruxelles. 1904. 31.

¹⁵ NYS, L., DE SMAELE, H. a.o. 'Een medisch object. Veranderingen in menswetenschap, cultuur en politiek.' in NYS, L., DE SMAELE, H. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen. 2002. 17.

¹⁶ On Dr. Mareska see QUETELET, A. *Science, mathématique et physiques du commencement du XIXe siècle*, Bruxelles, 1866. 304.

described as a 'typical' moral failing of the working class population, which could eventually also affect their physical health.¹⁷

Mareska and Heyman, like most hygienists until well into nineteenth century, did endorsed a moderate use of gin, as it was commonly accepted that alcohol was a stimulant that would warm the body in cold weather and provide strength and energy needed for heavy physical and mental efforts. For most of the nineteenth century beer and wine, were considered 'hygienic drinks' which, given that they were prepared in an honest way, were deemed beneficial for the human physique. Only towards the end of the nineteenth century, when physiological research proved the opposite, such deeply seated beliefs were gradually discarded by medical professionals but not among the people.¹⁸ In many rural communities there was no running water and the water from the pump on the farmyard was not pumped deep enough to be of any good quality. 'If you drink, drink beer, but never take water', warned Dr. Jean Demoor of the University of Brussels, who believed it was the task of the hygienist to teach the workers a fear for water.¹⁹

Belgian doctors insisted on maintaining a strict difference between 'hygienic drinks', or fermented drinks: i.e. wine and beer, and distilled drinks: spirits, above all gin. The drink of the rich – wine – and the Belgian national drink – beer – were represented as

¹⁷ MARESKA, J. & HEYMAN, J. *Enquête sur le travail et la condition physique et morale des ouvriers employés dans les manufactures de coton, à Gand*. Ghent. 1845.

¹⁸ WARNER, J. H. 'Psychological theory and therapeutic explanation in the 1860's: The British debate on the medical use of alcohol.' *Bulletin of the History of Medicine*. LIV, 1980. 253 & PAUL, H. W. *Bacchic medicine: wine and alcohol therapies from Napoleon to the French paradox*. Amsterdam. 2001.

¹⁹ DU CHAMPS, G., CONVENS, M. & VISSCHER, A. *Beelden uit de Belle Époque*. Brussel. 1988. 16. & VANDERVELDE, *Essais socialistes: l'alcoolisme, la religion, l'art.*, 60 n.

healthy. They would favour appetite, help digestion and activate intellectual activity.²⁰ Beer was praised from a nationalistic perspective. Such ideas were clearly inspired by a romantic vision of beer drinking, by memories of a long lost time before industrialisation, when there was no widespread use of gin and also no proletariat and when, it was supposed, farmers and artisans drank happily and carefree as in paintings of Brueghel. As beneficial and nourishing as Belgian beer was believed to be, traditionally brewed from natural ingredients, one had to be on his guard for the adulterated German, Bavarian variant, argued hygienist Hubert Boëns in an extended work titled *La Bière*.²¹ Throughout the nineteenth century, medical specialists expressed a constant anxiety about the quality of the national drink and its pureness, while at the same time they speculated about the quality of the Belgian race being 'tainted' by contagious disease and alcoholism. The effects of beer on the body were, according to the hygienists, completely contrary to the effects distilled alcohol had on the body. Gin, the drink of the working classes, was believed to make one aggressive and violent.²² The concern with the pureness of the beer, the national drink, always represented deeper anxieties about society. Doctor Boëns was convinced that because drinking beer was characteristic for a Belgian way of life, it should be considered a necessary item in the countrymen's diet.

Most nineteenth century doctors prescribed alcohol as therapy for all kinds of ailments.²³ The problem, medical temperance doctors pinpointed was that unlike with other

²⁰ JANSEN, A. *De l'usage et de l'abus des boissons et des liqueurs alcooliques. Manuel d'instruction populaire*. Namur. 1880. 69.

²¹ BOËNS, *La bière au point de vue médical, hygiénique et social*. 151.

²² PIRLOT, *L'alcoolisme en Belgique de 1830 à 1950. Mythe et Réalité*. 50.

²³ PAUL, *Bacchic medicine: wine and alcohol therapies from Napoleon to the French paradox*. 59-141.

medical 'fashions' like bloodletting, the people themselves had access to alcohol and would make uncontrolled use of it 'with great pleasure'.²⁴ As alcohol was believed to provide energy, industrial workers were held to be in need of a dose of it a day, to give them the necessary strength to do their work.²⁵ Many foremen in factories or mines offered their workmen a glass of gin before starting the day and also agricultural workers demanded their share of gin from their employers.²⁶ Among the middle and wealthy classes the habit of taking liquors as *apéritifs* and *digestifs* was regarded as a necessary part of any meal, since alcohol would stimulate appetite and help digestion after heavy dining. Because alcohol also would grant intellectual and creative energy, it was also deemed indispensable for painters and writers, who would often drink too much of it.²⁷

During the cholera epidemic of 1866 in Ghent, the working class population drank large amounts of gin, which they regarded as an antiseptic and prophylactic. Drunkenness was an unavoidable side effect and therefore, those who were employed to go around the houses to pick up the dead victims of cholera and were offered a glass of gin in every house they visited, were consequently always terribly drunk.²⁸ Whereas during the epidemic the people thus entrusted their lives on the sanitary effects of alcohol, they

²⁴ B.S.M.B.T. mars 1908. 102.

²⁵ BOËNS, H. *Traité pratique des maladies, des accidents et des difformités des houilleurs*. Bruxelles. 1862.24.

²⁶ B.S.M.B.T. août 1901. 378. & DESGUIN, V. *De l'abus des boissons alcooliques*. Bruxelles. 1876. 2. & GAUSSIN, *Le fléau moderne : traité complet médico-moral de l'alcoolisme ; causes, effets, remèdes*. 225.& BUYSE, 'Het leven van Rozeke van Dalen'. 17-19.

²⁷ *Le Mouvement Hygienique*. Oct. et Nov. 1886, 372. & 'L'art alcoolique' in B.S.M.B.T. oct. 1901. 513-6.

²⁸ DE WITTE, *Alles is omgekeerd: hoe de werklieden vroeger leefden (1848-1918)*. 115.

meanwhile disregarded the 'official' medical advice of basic hygiene to stay clear of the disease.²⁹

Although the problem of alcohol-dependence was acknowledged, within popular beliefs gin's energy-giving and restorative powers remained undisputed. Doctors increasingly questioned the beneficial effects of alcohol and sometimes even expressed reservations about beer and its reputation of *boisson hygiénique*. 'For the production of habitual drunkenness', wrote Hippolyte Barella in 1900, 'one does not necessarily need to resort to distilled drinks. So-called hygienic drinks, fermented drinks like wine, cider and beer can equally produce such a state.'³⁰ But in 1879, Barella had still asserted that 'abuse of Belgian beer does not produce a pathological state that one could call alcoholism' and like most hygienists he combined a conviction of the healing character of alcohol with a strong condemnation of its abuse.³¹ *Usi, sed not abuti*, (Use but do not abuse) was the motto of the temperance movement Barella set up a year earlier.

This *Association belge contre l'abus de boissons*, was the first organization of its kind in Belgium, born within hygienist circles. Officially the organisation, which would later change its name to *Ligue patriotique contre l'alcoolisme*, was non-denominational, but in practice, its ideology was liberal and Catholic, corresponding to its bourgeois membership. The anti-alcohol movement in Belgium, like in France, was organised and dominated by medical professionals. The organisation had 174 initial members of whom 79 were likeminded medical professionals and not unpredictably, from the late 1870's

²⁹ NYS, L. *Moderation as a medical moral. The invention of the hygienic body in Belgium ca. 1840-1914*. Unpublished Paper. Anglo-Dutch-German Workshop: Patients' Body Perceptions, 11-13 July. 2003.

³⁰ BARELLA, H. 'Note sur l'internement et la libération des irresponsables dangereux.' dans *Bulletin de l'Académie Royale de médecine de Belgique*. 1900, XIV. 355.

³¹ BARELLA, *Les alcools et l'alcoolisme*. 9.

onwards articles on alcoholism appeared ever more frequently in the *Bulletin de l'Académie de Médecine*.³² The *Ligue* battled drunkenness through propaganda. Like other aspects of 'hygiene', drunkenness, although it affected the entire social body, was mostly considered as a personal responsibility of the working class individual. The task of the hygienist temperance campaigner was to investigate the possible bad influence of squalor, immorality and excessive drinking on the worker's health and to inform of these threats.³³ In a periodical and in almanacs, on posters and postcards the organisation advocated the merits of moderation and clarified the dangers of intemperance, for both mind and body. Drinking was for the doctors of the *Ligue* always a problem of the working-class male and it was represented as the largest obstacle on the way of better living conditions. Saving and frugality were encouraged as alternatives. The Belgian temperance movement always remained a relatively small scaled, bourgeois lobby group, certainly when compared with the popular mass following that temperance and abstinence movements attracted in Britain, or even in Holland.³⁴ By the end of the nineteenth century, the *Ligue patriotique* had no more than 3700 members, and all of them were bourgeois.³⁵

The influence of the *hygiénistes* grew in Belgium in the last part of the nineteenth century as Pasteur's bacteriological revolution and changing perceptions about the importance of

³² SCHOLLIERS, 'The medical discourse and the drunkard's stereotyping in Belgium, 1940-1919.' 230.

³³ NYS, 'Nationale plagen. Hygiénisten over het maatschappelijk lichaam.' 230. & VELLE, *De nieuwe biechtvaders: de sociale geschiedenis van de arts in België*. 317-318.

³⁴ On the temperance movement in Britain: HARRISON, *Drink and the Victorians: the temperance question in England, 1815-1872*. & in Holland: VAN DER STEL, J. C. *Drinken, drank en dronkenschap: vijf eeuwen drankbestrijding en alcoholhulpverlening in Nederland*. Hilversum. 1995.

³⁵ CRISPEELS, Y. *De strijd tegen het drankmisbruik in België, eind 19e begin 20e eeuw* Licenciaatsverhandeling, Katholieke Universiteit Leuven. 1982. 57.

the social versus the individual resulted in new discourses on 'contagion'.³⁶ In 1884, Hippolyte Barella, among others, launched a specialist publication on hygiene in all its aspects: *le Mouvement Hygiénique*. In the language of the hygienists, drunkenness was located at the centre of discourses on contagion, closely intertwined with other 'popular diseases' like cholera, tuberculosis and syphilis, thought to be conceived amidst the poverty and squalor of the slums and public houses of the city proletariat.³⁷ Contemplating the devastating cholera epidemic of 1866, Dr. De Mayer remembered twenty years later that in his town of Boom, near Antwerp, the epidemic made most of his casualties among the poorer classes who were, he considered, as a rule inveterate drinkers. The disease had only killed two bourgeois and one of them, Dr. De Mayer recalled, had been a drunkard and the other one had just returned from a local fair, where he had drunk a few glasses too many.³⁸

In 1898, Hippolyte Barella set up a new temperance movement specifically aimed at medical professionals, the *Société Médicale Belge de Tempérance*, whose quarterly bulletin, significantly, appeared as a supplement with *Le Mouvement Hygiénique*. The *Société*, a small professional organisation with only 170 effective members by 1902, aimed with its bulletin to inform medical professionals of the dangers of alcohol-excesses and chronic alcoholism, publishing for example informative drawings of vital organs comparing those of temperate and alcoholic patients.³⁹ It also tried to dissuade doctors from making

³⁶ AISENBERG, A. R. *Contagion: disease, government, and the 'social question' in nineteenth-century France*. Stanford. 1999. 71. & BARNES, D. S. *The making of a social disease: tuberculosis in nineteenth-century France*. Berkeley. 1995. 138-173.

³⁷ NYS, 'De ruiters van de Apocalyps. 'Alcoholisme, tuberculose, syphilis' en degeneratie in medisch België. 1870-1940.' 26-46.

³⁸ Commission du Travail, I. 1111, 5443.

³⁹ B.S.M.B.T. sept 1898. 1. &, sept 1902. 403.

too generous use of alcohol in their prescriptions.⁴⁰ Their main message was that drunkenness, like other social illnesses formed in the lowest regions of society, could rapidly spread, multiply and cause horrible chaos, threatening the entire social body.⁴¹ Through contagion, at the core of the hygienic canon, those afflictions could after all also cross class borders. Syphilis seemed increasingly apparent among middle and upper class men, while tuberculosis 'cruelly mocked material advances and moral precepts'.⁴² Alcoholism and its effects destroyed bourgeois families as much as it did working class families, bringing middle class respectability down with it.

A theory of germs and contagion could indeed account for the crossing of class barriers of diseases such as cholera, syphilis and tuberculosis. The male bourgeois would contract syphilis from a morally debased infected prostitute and tuberculosis could be caught on a walk in town because uneducated workers, ignoring the health-offensives of the hygienists, would continue to spit on the street.⁴³ But this theory of contagion became problematic in the case of alcoholism: there was no such thing as a 'alcoholic germ'. The moral aspect seemed to weigh heavier on alcoholism. Could the upper class drunkard be afflicted by the same immorality that had led to the plague of intemperance among the lower classes? Objective 'scientific' observations left the medical professionals with no

⁴⁰ B.S.M.B.T. mars 1908. 102.

⁴¹ HAVELANGE, C. 'De uitvinding van de wanorde. Het negentiende-eeuwse verbond tussen collectiviteit en gezondheid.' in NYS, L., DE SMAELE, H. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen. 2002. 83.

⁴² NYS, 'De ruiters van de Apocalyps. 'Alcoholisme, tuberculose, syphilis' en degeneratie in medisch België.1870-1940.' 33. & VELLE, K. 'De syphiliskwestie in België in de 19e en het begin van de 20e eeuw.' *Tijdschrift voor sociale wetenschappen*. IV, 1987. 335. & DAVIDSON, R. & HALL, L. *Sex, sin and suffering : venereal disease and European society since 1870*. London. 2001. & DORMANDY, T. *The white death: a history of tuberculosis*. London. 1999.61.

⁴³ PARENT, M. 'Propreté et hygiène dans les gares et bureaux de poste.' in *La Ligue.Organe belge des droits des femmes*.1898-1914. 1912. 42-43.

other option than to accept a problem of upper class drunkenness as well, affecting the health of the immoderate consumers. Hygienists, however, liked to stress that in spite of drinking liquors and wines in excessive quantities, bourgeois who suffered ill health as a result of excessive drinking would not, generally, get drunk. So, while alcoholism, also among the bourgeoisie could no longer be overlooked, drunkenness, in the medical discourse, remained the prerogative of the lower classes.

Although the medical profession was forced to accept upper class alcoholism, the bourgeois drinkers themselves seldom agreed and they would be outraged and insulted if one was to treat them as alcoholics.⁴⁴ Alcoholism was not an easy diagnosis to make with a wealthy patient and as doctors had to 'remember that he who paid the piper, called the tune', they were advised to go about such a problematic consultation very cautiously:⁴⁵

Common medical sense provides you with some clues. You understand immediately that it is needed to curb the habit of drinking small glasses of liquor at any given occasion. But how gently and with how much competence do you have to give such an advice! You are going to touch a sensitive point. The self-love of your client and his growing taste for spirits is going to be seriously hurt if you treat him as an alcoholic [*d'alcoolique*] [...] Very often, you will not change anything; the only result that will be obtained is that your patient will take a sudden dislike to you. One might as well not call the things with their name and tackling the enemy indirectly, you can remark that such and such stomach trouble warrant pure mineral water or milk. [...] Thus you will safeguard the

⁴⁴ *Rapport de la commission à laquelle a été renvoyé le mémoire de M. le dr. Mora, à Brunehamel, relatif à l'alcoolisme.* Brussel 1881 5.

⁴⁵ PORTER, 'The patient's view. Doing medical history from below.' 192.

immediate health interest of your client, who will believe you and will obey you if you talk of his disease of the kidneys, the stomach etc. but do not admit, certainly not initially, that you identified him as a man consumed by alcohol.⁴⁶

The upper class gentleman did not want to accept that he was suffering from alcoholism, with its connotations of everything working class: poverty, immorality and weakened will power. A strict bio-medical theory of theory of contagion could simply not account for a social problem to which morality was central. Apart from having to acknowledge the existence of immoral behaviour among the upper classes, the concept of contagion also did not allow space for the moral argument of the 'good' sober and frugal workers. Those necessarily had to exist, to contrast with their drunken and lazy antagonists, to justify the bourgeois temperance claim that alcoholism, a lack of education and poverty, were at the basis of working class squalor and not unfair social distribution.

It was untenable to approach drunkenness uniquely as a public health problem due to bad environment and lack of education, when there were sober workers and bourgeois drinkers. In the discussion on drink it was more than ever difficult to combine the uniformity and consistency of 'science', on which the validation of the medical profession was founded with the doctors' liberal and bourgeois ideas of self-restraint and morality and class difference on which their design of a good political and social order was based. And so the medical specialists' attention shifted from the environment of the drinker to his mind and body, while issues of moral responsibility remained central to the debate.

⁴⁶ *Bulletin de la société médical belge de tempérance*. août 1901, 370-71.

b. The alienists

Combining medical theories with ideas of personal liability for self-restraint and morality was the area of expertise of the new nineteenth century discipline of psychiatry. Madness and drinking were easily linked in more than one way: a state of drunkenness could be considered as a temporary state of insanity; a brief loss of reason. The unexplainable obsessive craving for the substance seemed akin to mania and finally, with medical expertise being mostly powerless in the face of addiction, drunkenness was like madness, a very difficult problem to remedy and institutionalisation seemed often the only solution.⁴⁷

Without medical professionals being able to offer a convincing 'scientific' explanation or a successful solution, people continued to find solace in lay rituals, often related to religion. Drinking gin in which an eel had died or from a bottle that had accompanied a corpse until its funeral would remedy problem drinking in the countryside.⁴⁸ In cities, patent medicines, powders and potions were sold over the counter, which could be added 'secretly' to the drunkard's favourite tipple.⁴⁹ Belgian doctors continued during the whole nineteenth century to campaign against such practices, which they denounced as 'quackery'.⁵⁰ However, the medical profession could not offer a constructive comprehensive alternative, as they conceived the relationship between drunkenness and mental pathology as very ambivalent and never clear-cut. The Belgian psychiatrist

⁴⁷ VALVERDE, M. *Diseases of the will: alcohol and the dilemmas of freedom*. Cambridge. 1998. 43-67.

⁴⁸ BAKKER, C. *Volksgeneeskunst in Waterland*. s.l. 1928. 180. & VAN ANDEL, M. A. *Volksgeneeskunst in Nederland*. Utrecht. 1909., 170.

⁴⁹ PIRLOT, L' *alcoolisme en Belgique de 1830 à 1950. Mythe et Réalité*. 144. & *Het volksgeluk*. avril 1912, 29.

⁵⁰ VELLE, *De nieuwe biechtvaders: de sociale geschiedenis van de arts in België*. 170-174. & HAVELANGE, C. 'Quelques aspects du discours médical pendant la 2nd moitié du XIXe siècle.' *Belgisch tijdschrift voor de nieuwste geschiedenis - Revue belge d'histoire contemporaine*. XVI, 1985. 175-199.

François Lentz, medical director of the state-asylum *St. Charles* in Tournai, explained how he clearly distinguished *buveurs d'habitude* (habitual drunkards), *alcoolisés* (alcoholics) and *alcooliques* (alcoholics), without, however, specifying the different nature of these apparently similar forms of drunkenness. Instead he stated that a clear distinction between the categories was impossible to establish.⁵¹

Although doctors could not explain and agree on what the precise connection between alcoholism and mental disease was and how the two functioned together, already in the mid-nineteenth century specialists and lay people agreed that heavy drinking was undeniably a cause of mental instability. As drunkenness annihilated reason, prolonged drinking would affect the nerves and the brain in a permanent and irreversible way. Alienist Josph Guislain identified drunkenness in 1852 as a form of mania, calling it 'manie ébrieuse': 'an unremitting need to swallow fermented liquors or spirits'. Within this group he further distinguished *manie crapuleuse* (villainous mania), 'mania a potu' and also 'dipsomania' and 'oinomania'. He instructed his students to carefully separate out different possible forms of alcoholic madness: *manie crapuleuse* was clearly different from 'dipsomania' or even more especially 'oinomania': an unexplainable urge to drink wine. Comparable symptoms were also not always to be interpreted similarly. 'Delirium tremens' for example, could, in Guislain's opinion, be considered as not more than an acute syndrome, but from the other hand 'in many circumstances it was to be treated as a mental disease.' [*il appartient aux phrénopathies*].

Apart from mental problems directly related to excessive drinking, Guislain singled out those possible situations whereby the 'need for drink presents itself during the course of the mania as a passing symptom' and whereby drink would thus be a symptom of

⁵¹ B.A.R.M.B.X, 1896. 465.

mental disease. Finally, in a last possible scenario, persons who did not normally seem to have the habit of getting drunk [*s'énivrer*] would demonstrate an abusive use of drink. In these cases, drinking was, maintained Guislain, the 'expression of a monomanie', undeniably a mental disease in its own right.⁵² Guislain elaborated here on theories of his French example Jean Etienne Esquirol, who in 1839, in *De maladies mentales*, had categorised alcoholics as 'monomanics', thereby controversially eradicating their moral responsibility.⁵³ Nevertheless, in 1852, Joseph Guislain did not worry about the situation in Belgium, where he found there were, compared to other countries, few sufferers of mental disease as victims of alcoholism 'in spite of the extreme cheapness of gin'. He himself did not have much experience in his institutions with the problem of madness caused by drunkenness. In the year 1849 he had only received eight patients who were treated for madness as a result of immoderate alcohol drinking and also in the years before that there were not many.⁵⁴

But in the latter part of the nineteenth century, it was felt that mental illness was dramatically increasing and that this was directly related to alcoholic excess, believed to be on the rise as well.⁵⁵ The official registration of statistics in Belgium, the *Annuaire statistique du royaume* stated in 1898 an escalation in the alcohol consumption since 1850 and a parallel increase in madness, whereby the first was immediately identified as the

⁵² GUISLAIN, J. & INGELS, B. C. *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand.* Paris. 1880. 141.

⁵³ GOLDSTEIN, *Console and classify: the French psychiatric profession in the nineteenth century.* 178.

⁵⁴ GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand.* t.2. 92.

⁵⁵ LEFEBVRE, B. *De l'augmentation du nombre des aliénés à notre époque et des causes de cette augmentation.* Bruxelles. 1866.

'deplorable result' of the last.⁵⁶ The doctors who would specialise in the treatment of mental patients, had organised themselves for the first time in 1869 in the *Société phréniatique*, an organisation that would, significantly, change its name to *Société de médecine mentale de Belgique* in 1873.⁵⁷ As the discipline of psychiatry developed, the treatment of madness became more institutionalized and ever more people, among whom many alcoholics, were taken care of in newly established asylums. This development in Belgium has not yet been studied, but Seebohm Rowntree counted in 1911, 43 private asylums in Belgium and 3, what he called, 'state' asylums, all entrusted to the care of religious congregations. He probably referred to the asylum in Mons the hospital *St Charles* in Tournai, and to the *Hospice Guislain* in Ghent.⁵⁸

Also in older institutions, like Lieurneux and especially Gheel, where lunatics were boarded among the farmers, it was felt that more people had become mad, because of excessive drinking. Dr. Peeters, the director in Gheel, declared that all the insane sent to him from the nearby beggar's colonies were victims of strong liquor.⁵⁹ Dr. Eduard Van Coillie estimated that 30 to 40 percent of the patients who had passed through the *asile-dépot* of the St-Jean hospital where he worked in Brussels before 1897, had been alcoholics, turned lunatics through drinking.⁶⁰ Emile Vandervelde wrote in that same year that the increase of *aliénés* was 'one of saddest characteristics of our contemporary age' and he attributed it to the 'feverish life of modern societies, the growing instability

⁵⁶ B.S.M.B.T. sept 98, 352.

⁵⁷ GODDERIS, J. 'De geesteszieken: nieuwe inzichten en instellingszorg.' in DE MAEYER, J., DHAENE, L. a.o. eds. *Er is leven voor de dood : tweehonderd jaar gezondheidszorg in Vlaanderen* Kapellen. 1998. 68

⁵⁸ SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 488.

⁵⁹ MELCHIOR, *De jeneverplaag, of het alcoholisme in België*. 51

⁶⁰ B.S.M.M.B. 146-147, Aout-Oct 1909. 360.

of social conditions and the development of alcoholism.⁶¹ According to the disquieting Rapport of the Committee of Assistant inspectors of *asiles* from 1893, that stated that the number of people in the Belgian asylums had doubled over the last ten years, 6% of the total admissions were for 'alcoholic madness' [*folie alcoolique*].⁶² But what 'alcoholic madness' exactly embodied, would prove material for long, elaborate discussions.

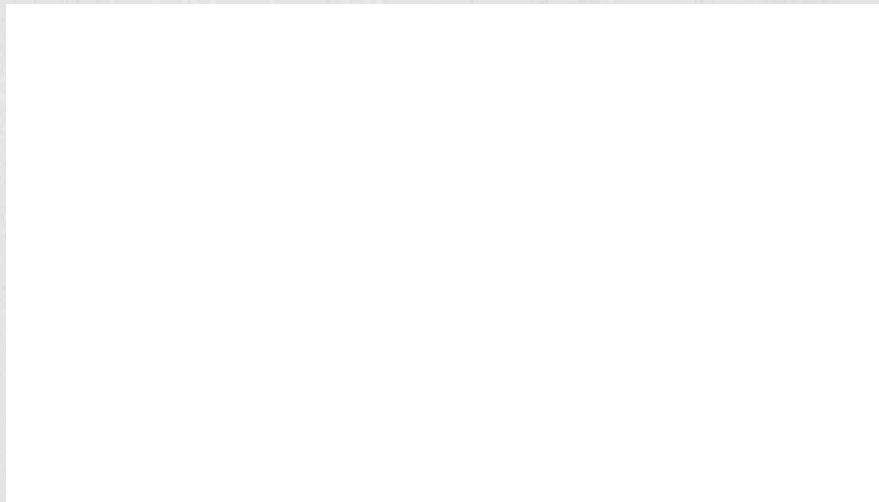
The notion of alcoholic madness found its way into the public imagination and the medical temperance rhetoric used its dramatic representations to deter people from drink. Theatrical illustrations in the *Almanach de la tempérance*, edited by the *Ligue patriotique contre l'alcoolisme* showed for example how the shocked patrons of a pub gathered around the dramatically seizing body of a drunkard who 'after emptying his twentieth glass crashed into a fit of epilepsy' or how a delirious women was tied on a cart on her way to the asylum. Of alcoholic afflictions, the dramatic convulsions and outlandish visions that accompanied 'delirium tremens' played strikingly on the mind of contemporaries. Delirium tremens was already identified from classical times and described and named in the early nineteenth century.⁶³ But it was only after 1874 that 'delirium tremens' and its legitimate place in the asylum became more frequently discussed within Belgian psychiatric circles after the French psychiatrist Valentin Magnan had dedicated more than half of his book on alcoholism, which would have a major influence in Belgium, to the condition.⁶⁴

⁶¹ as quoted in DHAENE, C. *Sint-Jozef Kortenberg: van 'Maison de santé' tot Universitair Centrum ,145 jaar zorg voor geesteszieken, 1850-1995*. Leuven. 1995. 154.

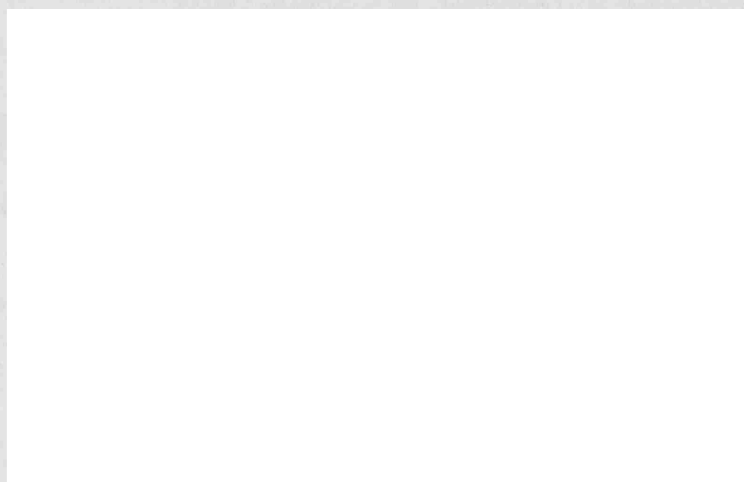
⁶² *Treizième rapport sur la situation des asiles d'aliénés du royaume ; années 1883 à 1892*. Bruxelles. 1895.

⁶³ PORTER, R. 'The drinking man's disease: the 'pre-history' of alcoholism in Georgian Britain.' *British Journal of Addiction*. LXXX, 1985. 385-396. & MADDEN, 'Substance use disorders. Clinical section.' 659.

⁶⁴ MAGNAN, V. *De l'alcoolisme, des diverses formes du délire alcoolique et de leur traitement*. Paris. 1874. 36.



7. Vaderlandschen bond tegen alchoolism. *Almanak der matigheid*. Brussel, 1913



8. Vaderlandschen bond tegen alchoolism. *Almanak der matigheid*. Brussel, 1910.

Not only mania, but also dementia was increasingly identified as a disorder that could be caused by drunkenness. In the late nineteenth century doctors were especially worried about the large number of people in asylums suffering from 'general paralysis of the insane'. General paralysis was a mysterious affliction until it became after 1913

identified as the tertiary stage of syphilis.⁶⁵ Several symptoms of general paralysis like trembling of the tongue, shaking of the hands and difficulties in talking were also to be found back with chronic alcoholics.⁶⁶ In the ongoing discussion about the causes of general paralysis, the majority of practitioners were convinced that the affliction was the necessary outcome of alcoholism. Dr. Bernard Lefebvre from the university Louvain and honorary physician of the 'asiles des aliénés' of that city, called it the 'fatal exhaustion' [*abrutissement*] in which [all alcoholic diseases] converge.'⁶⁷

Alcoholism was not only identified as a contributory cause of mental distress, it became increasingly explained by psychiatrists as a mental disease in its own right. 'The alcoholic,' wrote Dr. van den Corput in 1897, 'subject to his mindless passion is no longer master over his enslaved will. It is a lunatic who does not have anything left than his animal instinct to guide him.'⁶⁸ Joseph Guislain had already mentioned alcoholism as a form of monomania and specifically 'dipsomania' as an uncontrollable urge for alcoholic drink.⁶⁹ The concept of dipsomania was taken on by Valentin Magnan in France who connected it with heredity and from his 1884 *Leçons cliniques sur la dipsomanie*, published in *Le Scalpel*, the Belgian asylum doctors learned that the *dipsomane* fought fervently but unsuccessfully against his impulses and that after having given into them he or she usually felt guilty. The main difference between the ordinary drunkard and the sufferer from dipsomania was that the first was a lunatic before drinking, the latter only possibly

⁶⁵ QUÉTEL, C. *History of syphilis*. Cambridge. 1990. 164.

⁶⁶ as pointed out in contemporary manuals found in the library of the Hospice Guislain: BALL, B. *Leçons sur les maladies mentales*. Paris. 1883., 652. & WEYGANDT, W. *Atlas-manuel de psychiatrie*. Paris. 1904. 585.

⁶⁷ B.A.R.M.B. IX, 1875. 111. & XI, 1897. 864.

⁶⁸ VAN DEN CORPUT, E. *L'alcoolisme, ses causes mésologiques, son extinction physiologique* Brussel. 1897. 10.

⁶⁹ GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand*. 141.

became one, because of drinking.⁷⁰ The concept of 'addiction', as is used today, was not put forward by nineteenth century psychiatrists, but 'dipsomania' alluded to those apparently inexplicable spells of excessive drinking. Dipsomania was invented to delineate those forms of drunkenness that were 'abnormal', with people that would 'normally' not ostensibly drink extensively. For Valentin Magnan, dipsomania was a form of alcoholism typically found among women. As with other labels of drunkenness, the term 'dipsomania' was never consistently used; but when it was resorted to, it was always to clearly distinguish the mentally ill 'dipsomaniac' from the 'normal drinker'.

Dr. François Lentz recognized, along with Magnan, a clear difference between ordinary drunkenness and dipsomania. For him dipsomania was not even a form of alcoholism but a distinct disease, an actual mental disorder in its own right.⁷¹ Although Lentz was excited about the prospect of scientific study in psychiatry the idea of dipsomania offered, he pleaded for a careful analysis of the problem by medical men, because it would be extremely dangerous to confuse 'periodical drinking bouts as a result of social circumstances ' with 'dipsomania'.⁷² Also his colleague Dr. Mora stressed the need to establish the distinction between *vice-ivrognerie* - vicious drunkenness - from *folie-ivrognerie* - insane drunkenness - or, in other words, the drunkard from the mental patient [*le buveur de l'aliéné*]. The dipsomaniac is irresponsible, because he is insane,' he concluded, 'the ordinary drunkard is irresponsible because he is nothing else but wicked

⁷⁰ *Le Scalpel. Organe des garanties Médicale du peuple et des intérêts Sociaux et Scientifique de la médecine, de la pharmacie et de l'art vétérinaire*. 1850-1914. 2 mars 1884. 230; 16 mars 1884. 246; 20 avril, 1884. & 24 avril, 1884. 284.

⁷¹ DALLEMAGNE, J. *Dégénérés et déséquilibrés*. Bruxelles. 1894. 554.

⁷² LENTZ, *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolegal*. 562.

[vieux].'⁷³ Drunkards did not deserve to be treated as patients; they needed to be corrected, in prison. But dipsomaniacs, as mental patients were entitled for treatment at a *maison des fous* just like any other *aliéné*.⁷⁴

When drunkenness manifested itself among the bourgeoisie, it was mostly represented as an abnormal phenomenon. Drunkenness, admitted Dr. Van Den Corput, sometimes could indeed also trouble 'the unemployed man of independent means or any inactive man whose intelligence was kept unoccupied.' Consequently those people would look for a distraction for their boredom in strong alcoholic drinks. The doctor concluded: 'even some learned man, like countryside doctors, bound by a rude and ungrateful job, or lawyers without clients or misunderstood dreamers, sometimes yield to the deceiving appeal of spirits.'⁷⁵ Those people, who became lured into alcoholism belonged to 'the category of *névrosiques*, lacking notions of order, among those who were badly balanced [*déséquilibré*].'⁷⁶ But Dr. Mora insisted that 'one has to admit that it was among the improvident workers, living day by day without worries for tomorrow, often fearing neither God nor man, that the harm of alcohol makes the greatest ravages', and not among the wealthier classes.⁷⁷ Equally Hippolyte Barella noted derisively that, although he understood that it was indeed difficult to define rigorously limits between drinking prompted by an immoral character and drinking driven by a mental disease, he was convinced that the workers he saw drinking every Monday, did certainly not do so

⁷³ BARELLA, H. *Rapport de la commission à laquelle a été renvoyé le mémoire de M. le docteur Mora, à Brunehamel, relatif à l'alcoolisme* Bruxelles. 1881. 16.

⁷⁴ B.A.R.M.B. XV, 1881. 758.

⁷⁵ VAN DEN CORPUT, *L'alcoolisme, l'hérédité et la question sociale*. 24

⁷⁶ VAN DEN CORPUT, E. *Le poison alcool. Nouvelles considérations à propos de l' 'alcoolisme'*. Bruxelles. 1895. 15.

⁷⁷ VAN DEN CORPUT, *L'alcoolisme, l'hérédité et la question sociale*. 24

because they suffered from a disease, instead, they just indulged because they liked it.⁷⁸

All players in the debate urged for a careful distinction between various possible forms of alcoholism and held the authority of medical professionals to be the only and final arbitrator. But they all disagreed or failed to explain on which grounds precisely the demarcation between vicious drinking and dipsomania was to be made.

According to Dr. Jules Dallemagne, professor of legal medicine at the Free University in Brussels, heredity was the key to understanding different forms of drunkenness. He insisted on the importance of heredity in an influential collection of his lectures on his specialist subject: *Dégénérés et déséquilibrés*, published in 1894. Heredity distinguished normal from abnormal drunkenness and established the difference between *ivrognerie* and *dipsomanie*. Whereas with the ordinary drunkard, the need to drink was a result of his habit and of 'his internal struggles at the mercy of the occasion', the dipsomaniac reached for the bottle as a result of his predisposition, he was, in other words, born, with it.⁷⁹ Also Hippolyte Barella in 1897 argued that alcoholics only became lunatics [*aliénés*] when they were 'hereditarily charged' [*taré*] and that 'pure alcoholism' was transformed significantly in its clinical form by the addition of a new and powerful pathological element such as heredity.⁸⁰

c. Heredity and degeneration

By the end of the nineteenth century, the way in which the relationship between drunkenness and its allied afflictions: tuberculosis, general paralysis, epilepsy and all

⁷⁸ B.A.R.M.B. XV, 1881. 13.

⁷⁹ DALLEMAGNE, *Dégénérés et déséquilibrés*. 555.

⁸⁰ B.A.R.M.B. II, 1897. 881.

sorts of mental defects was understood, had indeed shifted. Alcohol was related to disease, no longer through concepts of contagion and environment, but by linking different generations via processes of heredity and degeneration. Scholars have analysed degeneration as a politicised medical theory with wide repercussions in culture in general.⁸¹ In their views, the representation of the masses as degenerate corresponded to a fear from the middle and upper classes, those who introduced and utilised the concept, for revolution and decline of civilisation. 'With their inclination to frighten themselves and their audiences,' wrote Peter Gay, 'late nineteenth century medical men, dreaded spectres, that they themselves had painted on the wall.'⁸² Fear of the drinking and degenerate lower classes is indeed clearly palpable in the medical language in the last decades of the nineteenth and the first of the twentieth century.

Ideas of heredity had always formed part of the thinking about drunkenness and madness and the medical discourse took on and transformed older narratives. It was an accepted truth that 'drunken parents beget drunken children'. Epileptic or mentally retarded children were often called 'Sunday children' [*les enfants de Dimanche*], being conceived by a father under the influence after a weekend of alcoholic excess. The concept of 'degeneration' was already in 1850, used by a Belgian doctor P. J. A. Vandeven, to explain 'the propagation of the morbid causes [...] of misery' which

⁸¹ e.g. PICK, *Faces of degeneration: a European disorder, c. 1848 - c.1918*. & NYE, 'Degeneration and the medical model of cultural crisis in the French Belle Époque.' 19-41. & HARRIS, *Murders and madness: medicine, law and society in the Fin de Siècle*. & PORTER, 'Enemies of the race': biologism, environmentalism, and public health in Edwardian England.' 147-178 & SOLOWAY, R. 'Counting the degenerates: the statistics of race deterioration in Edwardian England.' *Journal of Contemporary History*. XVII, 1982. 137-164. Specifically related to alcoholism see BYNUM, W. F. 'Alcoholism and degeneration in 19th century European medicine and psychiatry.' *British Journal of Addiction*. LXXIX, 1984. 59-70.. & HUERTAS, R. 'Madness and degeneration, II. Alcoholism and degeneration.' *History of Psychiatry*. IV, 1993. 1-21.

⁸² GAY, P. *The Bourgeois experience, Victoria to Freud. vol II: The Tender Passion*. Oxford. 1986. 348.

combined aspects of social environment, morality and heredity. Vandeven grouped drunkenness among wide-ranging other social, moral and environmental factors, such as debauchery, child labour, laziness and nakedness, which would work together to 'drain the life-sources of rich and poor alike'.⁸³ Joseph Guislain had as early as in 1852 explained the hereditary origins of madness in alcoholism with an example of a whole generation of lunatics, all brothers and sisters, children of a mother who consumed strong liquors 'in quantities so considerable that during a whole series of years she was to be found in a state of complete drunkenness'. This woman had never been mentally ill and neither was her husband or any other member of the family. Therefore her entire *descendance of aliénés* had to be necessarily the result of her drinking.⁸⁴

Thirty years later, heredity and degeneration had become a full-scale medical theory, explaining the provenance and results of excessive drinking. In the theory of heredity, drinking and the urge for it engraved itself within the individual's body. In 1881, the *Académie royale de médecine* organised an essay-writing contest to answer the following question: 'What are the effects of alcoholism on material and physical matters of the individual, as well as on his offspring?'⁸⁵ The winner of the competition was the alienist Francois Lentz and his work, a bulky volume titled *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médico-légal* was published by the *Académie* in 1884. In it, Lentz presented his readers with an interesting overview of the relationship between heredity and drunkenness in European

⁸³ VANDEVEN, P. J. A. *Considérations sur les causes de la dégénérescence de l'espèce humaine, et sur les moyens d'y remédier*. Louvain. 1850. 7.

⁸⁴ *Revue des questions scientifiques*. (R.Q.S.) 9 jan 1881. 497. & 10 oct. 1881. 551. & GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales*. Cours donné à la Clinique des Établissements d'Aliénés à Gand. t.II. 92.

⁸⁵ M.H. août 1887 288.

psychiatry.⁸⁶ He explained how alcoholic heredity was already known in antiquity, that Aristotle had claimed that a drunken mother begets drunken children and later other authorities, like Erasmus Darwin, had written the same. Children of drunkards were to be drunkards themselves or if not so, would suffer from all kinds of physical and mental afflictions. The first serious survey of the subject, the first 'scientific' study in the eyes of Lentz, had been very recently undertaken, he explained, by the French alienist Bénédict-Auguste Morel.⁸⁷

In a post-Darwinian world, degeneration had received a new interpretation: Morel concentrated within his reading of the idea of degeneration on racial decline, driven by 'hereditary taints' passed on by parents to their offspring. Alcohol was a poisonous agent, which would damage the heredity of a person and his children would inherit the vice, or different mental problems or diseases and thus become degenerate.⁸⁸ *Dégénérescences* were for Morel 'deviations from the normal human type, which deteriorate progressively towards extinction'.⁸⁹ What the 'normal human type' constituted was – of course – debatable. Morel concluded that degeneration was cumulative so a family of drinkers would eventually die out. Once Morel had published his famous monograph on degeneration, the Belgian medical establishment widely engaged in his ideas of *l'alcool-dégénérescence*. The Brussels medical periodical *Le Santé*, wrote in 1857: 'it is beyond doubt now that the children coming forth from drunken

⁸⁶ LENTZ, *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolégal*.. Lentz had for his earlier overview of contemporary psychiatry won the *Prix Guislain* in 1876, presented by le *Société de Médecine de Gand*. LENTZ, F. *Histoire des progrès de la médecine mentale, depuis le commencement du XIXe siècle jusqu'à nos jours*. Gand. 1876.

⁸⁷ MOREL, B.A. *Traité des maladies mentales*, Paris, 1860.

⁸⁸ MOREL, B.-A. *Traité des dégénérescences physiques, intellectuelles et morales de l'espèce humaine et des causes qui produisent ces variétés malades*. Paris. 1857.

⁸⁹ BYNUM, 'Alcoholism and degeneration in 19th century European medicine and psychiatry.' 61.

parents, can be born violent, as murderers, debauched etc. just like they can be born idiots, predisposed to madness and suicide.’⁹⁰ Dr. Lentz elaborated further on those two basic types of alcoholic heredity Morel had proposed: *hérédité de similitude* and *hérédité de transformation*. Within the first form the affection itself, drunkenness, was passed on to the offspring while in the second form the drunkard, *transformations morbides* would transmit physical and nervous afflictions of all types, like hysteria and epilepsy.⁹¹ Many of the children of drunkards would be mentally retarded and suffer from arrested development and very often they would show malformations like small or extraordinary large heads. ‘Because there are so many and so striking examples, ‘there is not one alienist,’ said Lentz, ‘who today can doubt this form of direct heredity.’⁹²

The Belgian discussions on alcohol, its relationship with madness and ideas of degeneration were fundamentally inspired by Lentz’s French colleague, Valentin Magnan. Based on his research in the Parisian asylums, Magnan would reformulate Morel’s theory following a transformist Lamarckian model, stressing the introduction of degeneration through harmful factors in the environment, like alcohol.⁹³ Contested and ambivalent, within theories of degeneration on drunkenness, ‘milieu’ and the environment remained always an important aspect in the Belgian interpretation of the

⁹⁰ ‘Dégénérescence et l’espèce humaine’ in *Le Santé*. Bruxelles, 10 mai 1857, 244. as quoted in DECLERCK, *Génèse du discours anti-alcoolique en Belgique 1830-1970*. 95.

⁹¹ LENTZ, *De l’alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolegal*. 540-559. & DALLEMAGNE, *Dégénérés et déséquilibrés*. 166.

⁹² LENTZ, *De l’alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolegal*. 559.

⁹³ DOWBIGGIN, ‘Back to the Future: Valentin Magnan, French psychiatry and the classification of mental diseases 1885-1925.’ 390. & TOLLEBEEK, J. ‘Degeneratie, moderniteit en culturele verandering. Een Belgisch perspectief.’ in TOLLEBEEK, J., VANPAEMEL, G., & WILS, K. eds. *Degeneratie in België 1860-1940: een geschiedenis van ideeën en praktijken*. Leuven. 2003. 299-319.

theory. Socially engaged hygienists always believed that a good education could possibly avoid the 'hatching of the hereditary germs'.⁹⁴ It was often the environment, for example a person's profession, that would lead that person eventually to succumb to his or her hereditary impulses. To avoid this, Hippolyte Barella suggested resourceful 'measures of social hygiene', which would mean:

to educate the abandoned and remove them from the atmosphere of vice; to take care of the unfortunate children of criminals, drunkards, thieves, vagabonds and prostitutes; to move workers away from their horrible shacks... etc.⁹⁵

Complete abstinence, said Barella in 1897, would be another way to try to avoid the hereditary impulses surfacing⁹⁶. Nevertheless, sometimes the heredity was so strong that the influence of environment was annulled. Even very little children of drunkards – on whom the milieu had scarcely made an impression – could show a clear impulse towards alcoholic liquor or they were born mentally retarded or abnormal as a result of degeneration through alcoholism in their families, all undoubted signs of mental degeneration.⁹⁷ A weakened fitness observed among Belgian soldiers proved that the Belgian race, due to the poison alcohol, was degenerating.⁹⁸

⁹⁴ B.A.R.M.B. XIV, 1900. 341.

⁹⁵ B.A.R.M.B. XIV, 1900. 341.

⁹⁶ B.A.R.M.B. XI, 1897. 893.

⁹⁷ B.A.R.M.B. XI, 1897. 881.

⁹⁸ PETITHAN, C. *La Dégénérescence de la race belge, ses causes et ses remèdes*. Bruxelles. 1889. 76. & NYS, "De grote school van de natie.' Legerartsen over drankmisbruik en geslachtsziekten in het Belgische leger.(ca.1850-1950)' 402. On Charles Petithan and his ideas of degeneration of the Belgian race see also: HAVELANGE, C. 'La Belgique médico-sociale, L'individu, la société, la race.' in KURGAN - VAN HENTENRYK, G. ed. *Laboratoires et réseaux de diffusion des idées en Belgique: XIXe-XXe siècles*. Bruxelles. 1994. 25-26.

Stories of hereditary drinking always stressed the terrible outcome for children, represented as innocent beings tainted by the vice of their parents often in melodramatic terms and the emphasis on 'abnormality' in children and the relationship with drinking parents increased unmistakably in the medical writings during the first decade of the 20th century. After 1900, several specialists published alarming results of research into the hereditary background of 'abnormal' children. When Auguste Ley, for example researched 172 pupils in a recently organised special school for blind, deaf, dumb and mentally retarded children in 1912 he concluded that 42.2 percent of those children had a father who abused drink and of 5.2 percent the mother drunk. In 6.7 percent of the studied cases, he detected alcoholism in the grandparents.⁹⁹ François Lentz felt that young children of drunkards were often cruel and unkind, as a result of degeneration and that they enjoyed the suffering of others and liked to torture animals. When these children grew up, they were lazy and without any discipline, easily turning to drink and debauchery, like their parents. Accordingly they would land up in beggar's colonies, prisons and lunatic asylums.¹⁰⁰ In this last possible outcome of parental drinking, which Lentz had called *dégénérescence morale*, alcoholism was not directly passed on to the next generation, but instead a lack of morality was, which in its turn would again lead to unbridled drinking.

The theory of inheritance of acquired characteristics clarified and justified the prevalence of moral overtones in a 'biological' theory on drunkenness and alcoholism as it implied that individual action had implications towards future generations. As one had a moral responsibility with respect to his or her children, indulging in drink meant jeopardising

⁹⁹ *Het volksgeluk*. December 1912. 81.

¹⁰⁰ LENTZ, *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médicolégal*. 556.

the next generations and eventually the entire race. In the discourse of degeneration, immorality was often held responsible for the onset of physical degeneration.¹⁰¹ Also Dr. Lefebvre from Louvain acknowledged that alcohol did not only affect the individual but also his or her offspring and he was equally convinced that drunken parents would beget drunken children. For him, however, heredity was not necessarily to be understood in a biological way:

It is difficult to establish if there had been real transmission of the dipsomania of the parents to the children or if this deprived taste has developed under the influence of bad examples that they have encountered around them. Thus, admitting this last interpretation, it would be acceptable to say that that is still heredity, but moral heredity.¹⁰²

The idea of degeneration was fuelled by notions of Christian morality, instantly recognizable in the discourse of Catholic medical practitioners on drink and its dangers. Dr. Edouard van den Corput was one of the most influential amongst them. He was honorary physician in the Brussels hospitals and Catholic senator. As president of the *Commission Médicale de Brabant*, he was much involved with public health issues, campaigning for radical causes such as cremation and alcohol legislation and in 1897 he even proposed, unsuccessfully, a licensing law in the senate.¹⁰³ The abuse of alcohol, van den Corput was convinced, had fatal repercussions for the survival of the species and this because of a law in physiology, which had, he said, always existed, but was only recently given attention: 'the law of heredity or of atavism.' Van den Corput explained

¹⁰¹ VALVERDE, M. *Diseases of the Will: Alcohol and the Dilemmas of Freedom*. Cambridge. 1998. 57

¹⁰² R.Q.S. 10 oct. 1881. 553.

¹⁰³ VAN DEN CORPUT, *Le poison alcool. Nouvelles considérations à propos de l' 'alcoolisme'*. & MASOIN, E. *Discours prononcé aux funérailles de M. Ed. Van den Corput le 26 fév. 1908*. Bruxelles. 2004.

that the central belief in Christianity, the idea of original sin', was in fact this same law of nature. Therefore the arguments that were for centuries used by religion to 'enforce its moral education' could be efficiently substituted by a positivist explanation.¹⁰⁴

Degeneration based on a theory of acquired characteristics seemed a perfect paradigm to transform moral judgments into scientific 'truths'. But like drunkenness, the protean character of the broad theory that was degeneration was beset with paradoxes and what seemed self-evident at first sight, became exceedingly confusing. Like the contagion model, degeneration could not resolve questions on free will and personal responsibility. Alcohol was understood to be one of the most common causes of mental degeneration, one of the acquired characteristics leading to hereditary disease, but it could equally be its outcome.¹⁰⁵ Via degeneration, 'cerebral inferiority', could be the direct cause of alcoholic excess but also its result. With French specialist Paul-Maurice Legrain, Belgian doctors acknowledged how drunkards and their children would thus find themselves in 'a terrible vicious circle' being degenerates themselves because of their drinking, but also creating degenerate children.¹⁰⁶ So did drinking lead to bad heredity and degeneration or did a bad constitution lead to drinking?¹⁰⁷ And what was exactly the difference between normal drunkards and hereditary drunkards? François Lentz admitted that 'a certain vagueness [*obscurité*] still reigned over the nature and the manifestations of this

¹⁰⁴ VAN DEN CORPUT, *L'alcoolisme, l'hérédité et la question sociale*. 6.

¹⁰⁵ DOWBIGGIN, I. *Inheriting madness: professionalization and psychiatric knowledge in nineteenth-century France*. Berkeley. 1991. 118.

¹⁰⁶ LEGRAIN, P. M. *Hygiène et prophylaxie : dégénérescence sociale et alcoolisme*. Paris. 1895. 25. & HUERTAS, 'Madness and degeneration, II. Alcoholism and degeneration.' 1.

¹⁰⁷ *B.A.R.M.B.* XI, 1897. 881.

transmission of which it is not always easy to isolate the different factors.’¹⁰⁸ He stressed that the medical practitioner could be the only one possessing the appropriate knowledge to decide on the actual state of drunkenness.

Equally, the problem of how the alcoholic transmission and heredity precisely worked formed a vague and unclear part of the discussion. Dr. Van den Corput admitted that the exact workings of the laws of heredity were still not completely known, but they were certainly established enough to confirm the principles as an ‘undeniable truth’. As alcoholics were then a ‘stigmatised’ race, fatally destined to extinction, the problem of alcoholism contained its own solution: alcoholic drink was ‘the selective agent that makes useless beings disappear.’¹⁰⁹ For Dr. Alfred de Vacleroy, professor of hygiene at the military school in Brussels, the mechanism that would make families die out because of children carrying the burden of ‘the original taint’ [*la tare originelle*] was a natural law, which ‘by a sort of natural selection eliminates those ‘gangrenous’ elements that are harmful for the general well-being of society.’¹¹⁰ By the end of the century new research had led the German botanist August Weismann to reject the doctrine of inheritance of acquired characteristics. Nevertheless, in Belgium the Lamarckian theory of heredity was not questioned before the First World War. Instead, new emerging theories of hereditary

¹⁰⁸ LENTZ, *De l'alcoolisme et de ses diverses manifestations, considérées au point de vue physiologique, pathologique, clinique et médico-légal*. 540.

¹⁰⁹ VAN DEN CORPUT, *L'alcoolisme; ses causes mésologiques, son extinction physiologique* 13.

¹¹⁰ DE VAUCLEROY, V. *L'hérédité alcoolique. Conférence faite à l'assemblée générale de la Ligue patriotique contre l'alcoolisme, le 6 novembre 1892, à Mons. Bruxelles. 1893*. 8.

transmission spurred supporters of the Lamarckian theory to defend themselves and to explain how transmission of acquired characteristics in effect worked.¹¹¹

The Belgian psychiatrist Jules Morel was medical superintendent of the *Hospice Guislain* until 1896 and after that director of the new state asylum in Mons. He defended, with most Lamarckians, a theory of transmission of acquired characteristics through the 'germcells' of the parents. He presented in 1905 at an anti-alcoholic congress, a lecture titled *La dégénérescence alcoolique*, with the results of case studies from his own experience, that showed that there was an unquestionable link between drinking, madness and crime relating to heredity. Morality was in his argument a natural, inborn trait that man possessed, and alcohol would disturb this 'primitive moral'. However, a congenital predisposition existed among many lunatics and criminals who were generally in their turn the sons and daughters of drunkards.¹¹² He explained how the reproductive cells, both male and female, were charged with hereditary 'predispositions' of the parents in different quality and quantity. The new being would thus develop with physical, intellectual and moral qualities 'peculiar to the species' [*propres à l'espèce*]. These properties could be influenced, though, by the environment, before or after birth. Drinking, therefore, by the mother during pregnancy or later in life by the individual, influenced the physical, intellectual and moral qualities 'in the degenerative sense'.¹¹³

¹¹¹ BYNUM, 'Alcoholism and degeneration in 19th century European medicine and psychiatry.' 67-8. & WOIAK, J. D. *Drunkness, degeneration, and eugenics in Britain, 1900-1914*. University of Toronto. 2001. 189-190.

¹¹² B.S.M.B.T. mars 1908 125.

¹¹³ MOREL, J. *Rapport sur les désastres produits par l'alcoolisme (criminalité, aliénation mentale, dégénérescence)*. Bruxelles. 1906. 4.

Not all were persuaded of the disastrous effects of alcoholism for the individual and the race as a result of heredity. Some solitary voices in the debate were convinced that the importance of heredity was grossly exaggerated. Professor Alphonse Proost from the Catholic University of Louvain, for example, suggested that positivist scientists attributed too many of the evils in society to heredity. He accused them of thinking of the free will as only an illusion and of approaching humanity as 'the toy of its hereditary impulses without conscience'.¹¹⁴

But generally the examples from Belgian medical texts on alcohol and madness show how ideas of alcoholic degeneration were enthusiastically endorsed in Belgium especially towards the end of the century.¹¹⁵ Ideas of heredity and degeneration were as flexible and broad as alcoholism itself and could accommodate seemingly contradictory ideas of both biology and morality. On one hand it acknowledged environmental impact, within the theory of acquired characteristics, while on the other hand it endorsed biological predisposition through inheritance. Degeneration furthermore reinforced the authority of the alienists who were given the authority to decide over the interpretation of a particular case and so constructed the 'normal type' from which degeneration would be a deviation.

d. The criminal anthropologists

In 1897 Hippolyte Barella illustrated a lecture on alcoholism in the *Académie royale de médecine* on the role of alcohol as a predisposing cause of mental retardation and moral

¹¹⁴ R.Q.S. 11 avril, 1882. 529.

¹¹⁵ TOLLEBEEK, J., VANPAEMEL, G. and WILS, K. 'Een codewoord. Bij de geschiedenis van ideeën en praktijken.' in TOLLEBEEK, J., VANPAEMEL, G., & WILS, K. eds. *Degeneratie in België 1860-1940 : een geschiedenis van ideeën en praktijken*. Leuven. 2003. 3-7.

failure, with a series of photos. They were portraits of the third and the fourth generations of alcoholic degenerates whom he had encountered in his practice among the miners. He analysed the external characteristics of their faces and concluded that their 'elongated, asymmetric faces', 'deep eyebrow-folds' or 'prolonged chins' indicated a condition of 'abnormality'.

9. *Bulletin de l'académie royale de médecine*, II, 1897. 964.

Basing a 'scientific' theory on external physical characteristics was a practice introduced by 'criminal anthropology'. Famously instigated by the Italian Cesare Lombroso and the Turin school in the 1870's this new criminological 'science' was developed strongly in the progressive liberal circles of the Free University of Brussels in the two last decades of the nineteenth century and the beginning of the twentieth century.¹¹⁶ Criminal anthropology combined forces of both legal and medical specialists and drew on biological models and ideas of evolution to 'scientifically' research the genesis of and

¹¹⁶ DURVIAUX, S. 'Le cercle universitaire pour des études criminologie.' in MARY, P. & VAN DER VORST, P. eds. *Cent ans de criminologie à l'ULB*. Bruxelles. 1990. 21-44.

possible solutions for deviations of 'normal behaviour, like drinking.¹¹⁷ Belgian doctors like Jules Dallemagne and Louis Vervaeck studied faces and bodies of offenders, assuming that inborn criminal traits could be derived from their physiognomy.¹¹⁸ Drunkards and criminals became in more than one way jointly positioned within the language of criminal anthropology, with its emphasis on 'dangerousness'. The broad and winding model of degeneration, combining both determinist medical ideas with ideas of individual responsibility and environment became logically the shared language of those discussing what they believed was the innate relationship between alcoholism, lunacy and crime. In the concept of the 'dangerous alcoholic', within new 'criminological' theories of deviance, alcohol became both a social and a biological origin of criminal behaviour.

In 1891 the minister of justice, Jules Lejeune, introduced as part of a thorough reorganisation of the prison system, study units on mental medicine in Belgian prisons. Professor of the medical faculty at the university of Louvain, Ernest Masoin, led such a team examining the mental constitution of violent criminals, sentenced to the central prison of Louvain. In 1896, the same year in which Jules Dallemagne classified a passion for drink among the 'biological and sociological stigmata of criminality'¹¹⁹, Masoin compiled a set of statistics in which he compared prisoners who were in a state of drunkenness or who were 'habitual drunkards' with the level of violence of their crime.

¹¹⁷ VELLE, K. 'De misdaad als kwaal. Het succes van de criminele antropologie.' in NYS, L., SMAELE, H. D. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914*. Groningen. 2002. 332-354.

¹¹⁸ on criminal anthropology, significant in Belgium see BUSTRAEN, G. *Degeneratiedenken in de Belgische criminele antropologie*. Licentiaatsverhandeling, Katholieke Universiteit Leuven. 1997. & VELLE, 'De misdaad als kwaal. Het succes van de criminele antropologie.' On Louis Vervaeck see DE BONT, R. 'Louis Vervaeck en de Belgische criminele antropologie ca. 1900-1914.' *Bijdragen tot de eigentijdse geschiedenis*. IX, 2001. 63-104. Disappointingly, no biography or study exists of the work of the interesting figure of Jules Dallemagne.

¹¹⁹ DALLEMAGNE, J. *Les stigmates biologiques et sociologiques de la criminalité*. Paris. 1896. 79.

The research showed that the more severe the crime, the more the criminal had abused alcohol. For the worst criminals, 'the proportion was enormous': 41% had been drunk when committing the crime and no less than 60% were habitual drunkards.¹²⁰ Masoin could do no else than conclude that 'above all alcohol was to blame for the genesis of the gravest offences.'¹²¹ The statistics were overpowering and would convince the remaining sceptics in the Belgian medical and judicial establishment that:


In every alcoholic hides a possible, or even a probable murderer, he is a dangerous being heading towards crime. His progeny is not less dangerous [*redoubtable*]; or his taints lead him to crime as well, or else he will be incapable to make a living and will hence become a burden on society.¹²²

Once more, as had been the case in relation to madness, the propaganda of the medical temperance movement ardently engaged the subject of the violent alcoholic, dramatically juxtaposed with a suffering victim wife and innocent children.

¹²⁰ B.A.R.M.B. X, 1896. 415.

¹²¹ B.S.M.M.B. sept 1896.325

¹²² B.S.M.B.T. oct 1906. 420.



10. Vaderlandschen bond tegen alcoolism. *Almanak der matigheid*. Brussel, 1913.

i. Forced internment of drunkards

Hippolyte Barella received 'criminal anthropology' enthusiastically and said of it:

This science which will lead to the establishment of the prophylaxis of crime through the profound study of moral and social causes which lead to it, and this study will give us the right to demand of society not to limit itself to repress vice, but to force society to prevent it and that it should be studied through wise measures of social hygiene to prevent its return.¹²³

One such a measure of 'social hygiene' would be forceful internment of alcoholics and the topic was much debated in Belgium after 1890, when Jules le Jeune had included alcoholics in his legislation of dangerous lunatics.¹²⁴ But the issue of special institutions for alcoholics was not new, it had been raised already much earlier, by hygienists. As early as in 1877 on the London anti-alcoholic congress, Dr. Alphonse Moëller, director of the *Institut Pheumothérapique et Electrothérapique* in Brussels, where sufferers from

¹²³ B.A.R.M.B. XIV, 1900. 341.

¹²⁴ A similar debate was taking place in France in the same years. NYE, *Crime, madness and politics in modern France: the medical concept of national decline*. 234-235.

tuberculosis were taken care of, pleaded for similar, special institutions for drunkards established by the government.¹²⁵ Parallel with the concept of contagion, social responsibility demanded for the alcoholic in name of 'social hygiene', that the affected individual was to be cut off from the rest of society, so he could do no harm.¹²⁶ In neighbouring countries, special 'inebriate asylums' had been created in the second part of the nineteenth century. While specialised private institutions in America and all over Europe received wealthy alcoholics voluntarily in order to kick the habit, some other European governments had also introduced public reformatories where criminal drunkards could be forcefully locked up.¹²⁷ 'In Belgium', wrote Dr. Alfred de Vaucleroy, the Secretary of the *Ligue patriotique contre l'alcoolisme* in 1892 'not one establishment so far exists: the alcoholic, who wants to heal himself, can only choose between the hospital and the lunatic asylum.'¹²⁸ This was certainly so for poor alcoholics, as wealthier drinkers had a few more options available to them. Alcoholic members of respectable families were sometimes 'pensioned off' or went on their own initiative to health resorts like for example the hydropatic Kneipp-sanatorium in Bonsecours, whose proprietor Dr. Gustave Delaunois was a specialist on drunkenness.¹²⁹

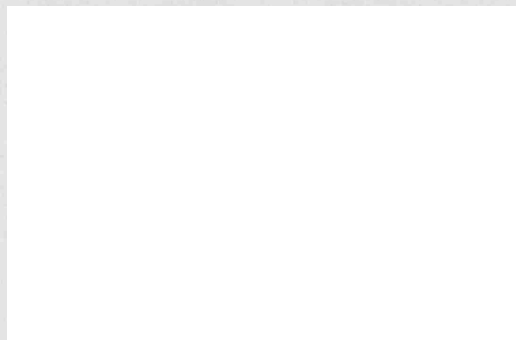
¹²⁵ M.H. avril, 1887. 158. & août 1887. 287.

¹²⁶ FOUCAULT, *Abnormal: lectures at the Collège de France 1974-1975* 34.

¹²⁷ BAUMOHL, J. & ROOM, R. 'Inebriety, doctors and the state: alcoholism treatment institutions before 1840.' in GALANTER, M. ed. *Recent developments in alcoholism*. Vol. V. New York. 1987. 135-174. & M.H. janv. 1894 45.

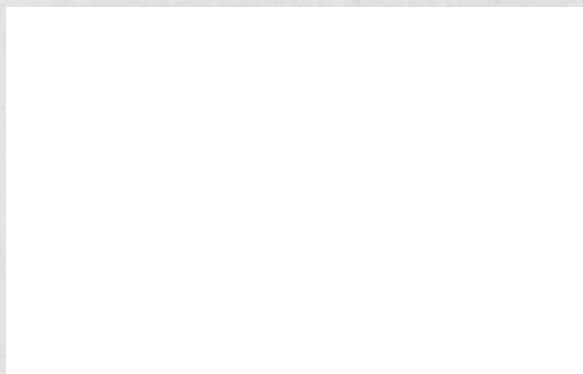
¹²⁸ DE VAUCLEROY, *L'hérédité alcoolique. Conférence faite à l'assemblée générale de la Ligue patriotique contre l'alcoolisme, le 6 novembre 1892, à Mons*. 17.

¹²⁹ *Het volksgeluk*. août 1894. 64. DELAUNOIS, G. *Entretiens sur l'intempérance. Misère, maladie, crime*. Bruxelles. 1889. & DELAUNOIS, G. *Les maux du buveur*. Bruxelles. 1895.



11. Postcard. *Bonsecours. Établissement de Docteur Delaunois.* s.d.

The waters from the pilgrimage town of Bonsecours were believed to have both medicinal and religious power. Therapeutics and religion were equally linked when wealthy drunkards were admitted into convents of religious orders, for a 'retreat' to get better. The Carthusian monks in Ghent for instance would receive alcoholics in their monastery, where they were believed to be completely sheltered from worldly temptations.¹³⁰ Well-off alcoholics would also be admitted, forcibly or voluntarily, into private lunatic asylums, like the Sanatorium of Fort Jaco in the leafy suburb of Brussels, in Uccle run by progressive psychiatrist Auguste Ley or the luxury asylum le Strop in Ghent, managed by the Brothers of Charity.¹³¹



12. Postcard. *Uccle sanatorium Fort Jaco. Un coin du parc.* s.d.

¹³⁰ *Fonds Guislain* Registre Médical. (F.G.R.M.) 16, 5173, 31 août 1886.

¹³¹ See further II. Drink and the doctors. 2. In practice: the alcoholic population of the Ghent asylums pp.-175 - 245.

When an international anti-alcoholic congress was held in Belgium in 1897, the question of special asylums to confine potentially dangerous alcoholics was raised. One of the guests at the conference was the Swiss professor Auguste Forel who had set up a *Trinkerheilstätte* in Ellikon-an-der-Thur, where drunkards were treated by means of complete abstinence. Forel and his research and opinions were much admired and Belgian temperance campaigners often quoted from his work. He subscribed to the contemporary orthodoxy on alcohol leading to mental illness and more remarkably in addition argued that the use of alcohol was also the chief cause of 'sexual aberration', a theory he published in his book on sexology in 1905, *Die Sexuelle Frage*¹³².

During one of the debates on the idea of compulsory confinement for alcoholics, Forel spoke positively from his experience at Ellikon. Conference delegate Hippolyte Barella asked him:

It seems that this [a special institution for drunkards] would mean that one would have to introduce 'preventive penalties' in our legislation to incarcerate thus people who have not yet committed a crime or an offence. So why, if one is to lock up alcoholics, are we not doing the same for gamblers and the 'debauched' [*debauchees*]? This seems dangerous and there seems to be all the more reason to ask ourselves what would be the criteria for incarceration.¹³³

By asking this question, Barella expressed one of the major objections in the public debate in Belgium against such institutions. He knew, of course, that the renowned

¹³² PREISWERK, F. 'Auguste Forel (1848-1931): un projet de régénération sociale, morale et raciale.' *Annuelles - Revue d'histoire contemporaine*. II, 1991. 25-50. Forel gave a lecture in 1907 on the *XIe International Congress on Alcoholism* on 'L'alcool et les questions sexuelles' in which he explained his theories. On the same conference Emile Vandeveldt spoke about 'alcoholism and the social question.' *B.S.M.B.T.* juin 1907.

¹³³ *B.A.R.M.B.* XIV, 1900. 337.

foreign specialist would answer with reasonable arguments to counteract these doubts. Forel located his theories firmly within contemporary attitudes to law and medicine: 'I am happy you asked me this question,' he started his answer, 'since it allows me the opportunity to acknowledge the direction taken by our lawmakers nowadays, thanks to works of the school of criminal anthropology and particularly of Lombroso. [...] It is better to prevent than to cure. [...].' He explained how it was the duty of a society to suppress crimes committed by unconscious [*inconscient*] persons by keeping them from doing any harm. As all drunkards could be potential criminals, Forel saw these institutions indeed as a kind of 'preventory prisons'. Hippolyte Barella agreed entirely, he equally believed at this point that the alcoholic was 'in reality but a lunatic' and that it was completely in the public interest that 'those harmful and incurable beings' should be incarcerated.¹³⁴ The 'sobering up' of alcoholic lunatics did not mean, he added, that they were cured.¹³⁵ About issues of personal liberty Prof. Forel was very outspoken: 'Do we have to continue,' he asked, 'under the pretext of a false feeling of justice, to tolerate the decimation of our society by alcoholics and with it to allow them to wipe themselves out?' According to the ideas of hereditary degeneration, the race of alcoholics would of course eventually die out, so their incarceration in special homes would not only protect society from their criminal nature, but prevent them from procreating and thus spreading their degenerate 'taints'. In this utilitarian argument, the general good for society would justify the locking up of degenerated alcoholics.¹³⁶

Dealing with so many different types of drunkenness, one of the major problems in the discussion about incarceration was how one was to determine who precisely had to be

¹³⁴ B.A.R.M.B. XIV, 1900. 338.

¹³⁵ B.A.R.M.B. XIV, 1900. 363.

¹³⁶ HARRIS, *Murders and madness: medicine, law and society in the Fin de Siècle*. 102.

locked up, why, and for how long. This question was not new; psychiatrists dealing with alcoholic lunatics in the asylums had to think about the issue daily. Joseph Guislain, in relationship with delirium tremens, had in the mid- nineteenth century asked his students: 'Can we lock up any man who is affected by maniacal over-excitement as a result of immoderate use of drink?'¹³⁷ His own answer was that this depended on the ways in which the patient presented himself and the opinion the psychiatrists could form about the individual's mental and physical state. When there was 'a justifiable hope' that the maniacal state would disappear in a few days and if the patient did not give himself over to serious disorders, especially when it concerned a first attack of the disease, one should avoid confinement. 'It would be imprudent and unwise to resort too often to such measures' warned Guislain. But, otherwise, if experience had proven that it was impossible to 'correct the vicious habits' of the patient, nothing would be more beneficial than to confide him into 'strange hands' and to submit him to the regime of a 'sanitary establishment.'¹³⁸ For Guislain, the alienist was in charge of deciding who was fit for the asylum and who should not be admitted. Promoting a therapy of 'moral treatment', he based his judgement on the strength of the willpower of the patient.

For Hippolyte Barella, half a century later, the medical specialist was still firmly in command. He found it self-evident that the entire responsibility to decide lay with the medical profession, who were 'generally men of a proven honesty'. He continued: 'one cannot have an absolute rule, it depends from case to case, but it is important that the *médecin aliéniste* should not be forced to act against science and against his own

¹³⁷ GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand.* 142.

¹³⁸ GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand.* 142.

conscience'. Based on the extent of the 'dangerousness' of the patient, the doctor should make his assessment and thereby be 'left completely free to decide and not restrained by the letter of rules and regulations.'¹³⁹ The doctor had become judge and his assumed high moral standards had to guarantee the correct medical and moral treatment of potential patients.

According to Dr. François Lentz, only those drunkards affected with a real material disease of the brain were to be locked up in institutions.¹⁴⁰ But the majority of habitual drunkards, [*buveurs d'habitude*] he said, did not belong to that particular group. However, he was not convinced that enough drinkers were 'cured' to justify the costs of special asylums. But for purposes of research it was advisable that private schemes would set up some institutions, where doctors could study the specific pathology of the alcoholic. Lentz found it unacceptable to have any compulsory internment for a drinker 'when his passion does not constitute a manifest nuisance for others', but, he made it clear, that under certain conditions, the authorities should be able to legally confine those 'whose through their acts, originating directly from the use of alcohol, cause damage to others'.¹⁴¹ So, concisely, a man could quietly drink himself to death in the privacy of his own home, but once violence or strange and unacceptable behaviour was involved he was a legitimate candidate for institutional treatment. Medical specialists and specifically psychiatrists appointed themselves as authorities on what constituted such behaviour.

¹³⁹ B.A.R.M.B. XIV, 1900. 360.

¹⁴⁰ B.S.M.M.B. XCII, 1899, 42-54. & XCIII, 1899. 209-221.

¹⁴¹ B.S.M.M.B. XCIII, 1899. 220. &

ii. Female alcoholism

The most extreme, unacceptable and pathological form of alcoholic excess was that committed by bourgeois women. A confusion of conventional gender roles, caused by women taking up employment and leaving the home had worried social observers: 'Especially in the large cities the woman tends more and more to copy the man in her lifestyle,' wrote Dr. Garnier, 'she now frequents bars and is always less and less in the home.'¹⁴² However, female drinking was seldom mentioned and when it was, it always concerned working class women. Specialists were convinced that

Alcoholism is less frequent among women than it is among men, and among women, only those belonging to the inferior classes have an inclination towards drinking.¹⁴³

Raymond De Ryckère was known for his 'feminist' criminal anthropological works: he was particularly interested in pathological crime among women.¹⁴⁴ He was a public prosecutor from Antwerp who made a splendid legal career in the tribunals of Brussels. Initially specialising in maritime law, he grew to be gripped by legal medicine and criminal anthropology and became a free-lance collaborator, contributing news from the Belgian front to the *Archives d'anthropologie criminelle, de criminologie et de psychologie normale et pathologique* edited by the leader of the French school of criminal anthropology, Alexandre Lacassagne. In 1899, with the publication of *L'Alcoolisme Féminin*, De

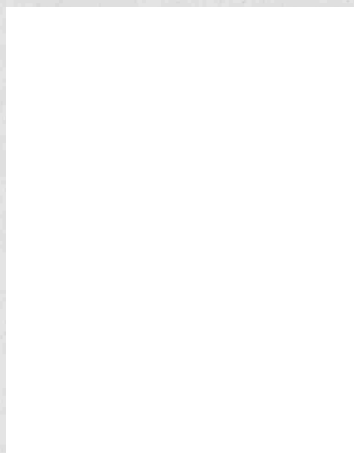
¹⁴² DE VAUCLEROY, *L'hérédité alcoolique. Conférence faite à l'assemblée générale de la Ligue patriotique contre l'alcoolisme, le 6 novembre 1892, à Mons.* 7. & GAUSSIN, F. *Le fléau moderne: traité complet médico-moral de l'alcoolisme; causes, effets, remèdes.* Namur. 1901.46. both quoted the french doctor Paul GARNIER, *La folie à Paris*, Paris.1890.

¹⁴³ B.S.M.B.T. sept 1911.351.

¹⁴⁴ DE RYCKÈRE, R. *La femme en prison et devant la mort.* Lyon. 1898. & DE RYCKÈRE, R. *La servante criminelle. Etude de criminologie professionnelle.* Paris. 1908.

Ryckère shockingly argued that alcoholism among middle and upper class women was on the rise. Drinking among upper-class ladies was considered so anomalous and 'criminal' that the subject was considered fit for a monograph in the series *Bibliothèque de Criminologie* edited by Lacassagne. *L'Alcoolisme Féminin* was nr. XX in the series, which further prided itself on titles on 'deviant' sexuality, on delinquent children and on sadistic sex-crimes.¹⁴⁵ Habitual drunkenness among ladies was such a scandalous condition, a taboo subject, that it had to be treated as pathological and criminal behaviour. It was to be kept hidden from the world as it completely undermined the sacred social role set apart for the bourgeoisie as 'angel of the house'.¹⁴⁶

But upper class women did certainly drink alcohol. They enjoyed sweet liqueurs and products like *Anisette* and *Elixir d'Anvers* were even marketed towards wealthy and stylish female consumers.¹⁴⁷



13. Affiche. Collection Nationaal Jenevermuseum Hasselt s.d

¹⁴⁵ RAFFALOVICH, M. A. *Uranisme et unisexualité: étude sur différentes manifestations de l'instinct sexuel*. Lyon. 1896. & RAUX, C. *Nos jeunes détenus: étude sur l'enfance coupable avant, pendant et après son séjour au quartier correctionnel*. Lyon. 1890. & LACASSAGNE, A. *Vacher l'éventreur et les crimes sadiques*. Lyon. 1899.

¹⁴⁶ DUFFIN, L. 'The conspicuous consumptive. Woman as an invalid.' in DUFFIN, L. & DELAMONT, S. eds. *The 19th century woman, her culture and her physical world*. New York. 1978. 29.

¹⁴⁷ as shown in the collection of advertisement posters for liquor in *Jenevermuseum Hasselt*.

Anti-alcohol campaigners mentioned alcoholic wealthy women 'between the lines': Dr. Auguste Jansen dryly commented: 'Often one sees ladies and even children take a liking [*prendre goût*] to those sweet drinks and make immoderate use of it.'¹⁴⁸ Women would take alcohol very often as a medicine, since it was considered to be helpful for all kind of female ailments and doctors prescribed it frequently.¹⁴⁹ The Belgian reticence concerning female alcoholism was in stark contrast with the British public discourse at the same period. In Britain, the theme of female middle class drunkenness dominated the discussions of the medical profession and the reformers in the late nineteenth century.¹⁵⁰ But also mainstream publications like *The Spectator* and the *Gentleman's magazine* ran articles on the trouble of 'secret drinking' and 'overstimulation in women'.¹⁵¹

Raymond De Ryckère had read and quoted British essays on the subject of female drinking and was the only Belgian author who pondered more extensively about drinking bourgeois. Modern middle class ladies had lost that unconscious sensation, De Ryckère observed, which working class women had never possessed in the first place: that in poisoning themselves they poisoned at the same time the children that had to be born from them.¹⁵² They used to refrain from drinking out of knowledge of their role in society as safeguards of morals and educators of children, but also as guardians of

¹⁴⁸ JANSEN, *De l'usage et de l'abus des boissons et des liqueurs alcooliques. Manuel d'instruction populaire*. 4.

¹⁴⁹ BOËNS, *La bière au point de vue médical, hygiénique et social*. 100. & *Le Scalpel*. 16 & 23 October 1881. & *B.S.M.B.T.* june 1900. 294.

¹⁵⁰ See my MA dissertation: *Class Gender and Alcohol in the Making of the Habitual Drunkards Act, 1870-1879*. UCL, 2001. 26-36.

¹⁵¹ 'Women and Alcohol' in *The Spectator*, feb 18, 1871. 187. & 'Overstimulation in Women' in *Gentleman's Magazine*, CCXLIV, 1879. 111.

¹⁵² DE RYCKÈRE, R. *L'alcoolisme féminin*. Lyon. 1899. 27.

the race.¹⁵³ De Ryckère was convinced female drinking lead to degeneration of the race, that had up until this point always been 'guarded by the feminine sex.'¹⁵⁴

Clearly inspired by the theories of Dr. Francois Lentz, De Ryckère identified two forms of female drunkenness.¹⁵⁵ First there was 'abnormal drunkenness' [*ivresse anormale*] – female intemperance could never be 'normal' – and secondly, he described 'pathological drunkenness' [*ivresse pathologique*]. With 'abnormal drunkenness', problem drinking among women came about as a direct result of their excessive alcohol consumption. The reason why women would reach this state was 'to change their conditions' out of boredom. Alcoholism among upper class ladies was described by de Ryckère as a predicament that often came about as a result of the blandness of their lives. Mostly drinking women would carry with them an enormous sadness and almost all of them, he wrote, 'have lived their tragic and painful novel of life, that often make real novels fade away'¹⁵⁶. De Ryckère's description of the drinking lady undoubtedly found its origins in fictional narratives. The way he represented the upper class alcoholic and her novel-like life beared very much resemblance with stories of 'tragic' heroines of the literature of the period. Probably De Ryckère had read *Anna Karenina*, published in 1877, as he quoted Tolstoy further on. Rather than with examples from real life, his portrait of the middle class inebriate seemed to be associated with the figure of the divorced, morally fallen and opium addicted Anna, or with for example the character of the wearied Emma Bovary – that other tragic fallen angel of the last half of the century – both irreversibly

¹⁵³ HARRIS, *Murders and madness: medicine, law and society in the Fin de Siècle*. 243.

¹⁵⁴ DE RYCKÈRE, *L'alcoolisme féminin*. 28.

¹⁵⁵ B.A.R.M.B. XII, 1898. & B.S.M.M.B. XC, 1898. 268-282. & XCI, 1898. 390-400.

¹⁵⁶ DE RYCKÈRE, *L'alcoolisme féminin*. 27.

heading towards dramatic self-destruction.¹⁵⁷ The need to revert to fiction is significant: only on the pages of a novel could the female addict solicit compassion as a suffering heroine. In a novel's pages she could do no harm, while in real life drawing rooms the female addict would ruin names and reputations.

The difference between 'abnormal inebriety' and 'normal inebriety' – which was never something women could suffer from – was according to De Ryckère the length and the intensity of the periods of drunkenness and the nature of some of the symptoms, all based on inexplicable feelings of passions. Such passions and irrational feelings could result in kleptomania, in erotic phenomena, suicide and even in homicide. Nevertheless, De Ryckère did not think that 'abnormal inebriety' was the most interesting form to study, he was instead fascinated by the second possible variation of female drinking, the 'pathological drunkenness'. Here, rather than being the immediate result of drinking, alcohol in this case instead only helped to reveal the latent and pre-existing manifestations of hereditary degeneration. Alcohol was here 'the spark that lights the fire', explained De Ryckère, but the same fire could be also lit by a completely other cause, like *une émotion morale*, by which he meant some form of sexual excitement. He went on to state that, though they are more interesting to study, in such cases the relation with alcohol and the pathological state was also more difficult to establish. He singled out four forms of pathological drunkenness: the manic, the convulsive, the somnambulant and the delirious.¹⁵⁸

Dipsomania was an important form of manic pathological drunkenness, a specific degenerative mental disease, for de Ryckère specific to woman. It consisted out of a

¹⁵⁷ DE RYCKÈRE, *L'alcoolisme féminin*. 114.

¹⁵⁸ DE RYCKÈRE, *L'alcoolisme féminin*. 55.

compulsive need to drink, which would reveal itself mainly during menstruation or pregnancy. Young girls would give themselves over to this form of madness, often in puberty and the manifestations of the disease very often disappeared again with the menopause.¹⁵⁹ Thus drinking, the deviant behaviour, came into being simultaneously with biological 'conditions' of women. But de Ryckère urged for watchfulness: very often, he knew, drinking women of higher social classes were wrongly diagnosed as *dipsomanes* by their doctors 'out of politeness' [*par politesse*].¹⁶⁰ They would not necessarily suffer from dipsomania; they would rather be affected by ordinary 'abnormal drunkenness'.

¹⁵⁹ DE RYCKÈRE, *L'alcoolisme féminin*. 29.

¹⁶⁰ DE RYCKÈRE, *L'alcoolisme féminin*. 113.

2. In practice: the alcoholic population of the Ghent asylums

Normative assumptions of what constituted problematic drinking practices were received and at the same time renegotiated and constructed in an institutional setting on the ward of the psychiatric hospital. In Belgium, drunkards could be detained in a mental asylum by the police or by a family member when their behaviour was regarded a threat to society. A formal demand for confinement together with a medical certificate were enough to have a patient legally committed for a non-specified period under the Lunacy Law of 1850.¹ The clear presence of what we would call today 'alcoholics' in the nineteenth century psychiatric hospital is a phenomenon that only recently received attention by historians. For France, work has been done in this context by Jacqueline Lalouette who studied the population of two local, rural institutions where, according to her research, 3.2 to 6.8% of the men and 0.8 to 1.3% of women suffered from alcoholism. The conclusions of her study remain vague mainly outlining that many alcoholics in the hospital were employed in the local wine industries.² Canadian historian Patricia Prestwich thoroughly researched the population of the different Parisian institutions based on the records of the admission office. In a study on alcoholism she focussed on the relationship between the French psychiatrists: the *aliénistes* and their clientele, deciding that the relationship between psychiatry and alcoholism was at all times ambivalent.³ More recently, Prestwich published new work on the female alcoholic

¹ 'Circulaire ministérielle du 12 août 1867' in *Recueil des circulaires, instructions et autres actes émanés du ministère de la justice, années 1866-67*. 169.

² LALOUETTE, J. 'Alcoolisme et classe ouvrière en France aux alentours de 1900.' *Cahiers d'histoire*. XLII, 1, 1997. 89-107.

³ PRESTWICH, P. E. 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' in BLOCKER, J. & WARSH, C. L. eds. *The changing face of drink: substance, imagery and behaviour*. Ottawa. 1997. 115-131.

population of the Parisian hospitals in which she reflects upon the gendering of drunkenness and the complex links between the medical specialists, the patients and their families.⁴

a. The asylums in Ghent

As the history of psychiatry in Belgium is virtually non-existent, the preserved admission registers from two important psychiatric hospitals for male patients in the city of Ghent have been completely unexamined. In those registers patients who were admitted to the *Hospice Guislain* and the *Maison de Santé le Strop* from the early nineteenth century onwards, were recorded. The information in those documents can provide answers to similar questions as Prestwich had asked for France about the ambivalent relationship between madness and alcoholism.

The *Hospice Guislain* was Belgians first modern public asylum opened in Ghent and funded by the city council. Its founding was endorsed by Dr. Joseph Guislain, who had been since 1828 medical superintendent of the two existing hospitals for mental patients in Ghent. Guislain is often referred to as the 'Pinel of the North', because he put an end to the chaining and the cruel handling of the insane and introduced the therapy of 'moral treatment' instead. In the 1830's, Joseph Guislain had, together with inspector-general of prisons Edouard Ducpétiaux, begun to criticise the state of care of the mentally ill in Belgium in the *Exposé sur l'état actuel des aliénés en Belgique, et notamment*

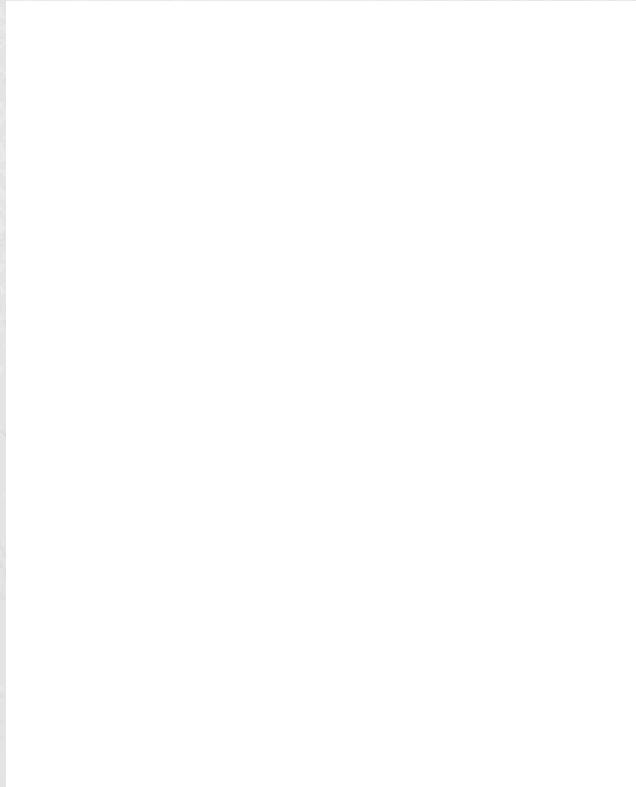
⁴ PRESTWICH, 'Female alcoholism in Paris, 1870-1920. The response of psychiatrists and families.' 321-336.

dans la province de la Flandre-Orientale and his intervention into the running of the service laid the foundation for the Law on Lunacy of 1850.⁵

After years of discussion, Joseph Guislain managed to convince the Ghent city council of the need for an asylum build on modern ideas for the treatment of the insane to replace the inadequate *Maison des Hommes Alienés* where he was in charge. Since the Middle Ages, the Catholic congregations of nuns and brothers took care of the sick and the insane in Belgium. After the French Revolution had abolished the Catholic charities and put the care of the sick and the insane under the city councils, these often still depended on the religious orders for the running of the institutions, reducing significantly the cost of care.⁶ This was the case for the city of Ghent, where the *Hospice Guislain* was run and managed by the 'Brothers of Charity'. Although the new laws on lunacy of 1850 as proposed by Guislain bestowed more power and influence on the asylum doctors, he pragmatically recognised the expediency of the Brothers as nursing personnel, out of practical, but also therapeutic considerations. The Catholic religion and its rigorous structures formed an ideal framework for his 'moral therapy.'

⁵ DUCPÉTIAUX, *De l'état des aliénés en Belgique, et des moyens d'améliorer leur sort: extrait d'un rapport adressé au ministre de l'intérieur, suivi d'un projet de loi relatif au traitement et a la séquestration des aliénés*.5.

⁶ SEEBOHM ROWNTREE, *Land & Labour: Lessons from Belgium*. 487.



14. *Hospice Guislain*: central courtyard with the chapel today.

When in 1857 294 mental male patients moved into the new buildings, Guislain explained the workings of his 'moral treatment' therapy in terms of body politics.⁷ The building, a superb complex of brick, designed by city architect Adolphe Pauli was for him the body of the enterprise; the 'Brothers of Charity', who took on the administration of the institution and were its nursing staff, were its hands and heart, and he himself, the medical superintendent, was its brain.⁸ But as the number of poor lunatics continued to grow, the Ghent city counsel decided to limit the admissions to only dangerous cases. Hereby it undermined Guislain's principles, which stressed treatment and the public lunatic asylum in effect became again an institution of restraint.⁹ But nevertheless, the

⁷ STOCKMAN, R. 'Life within the walls of the Guislain mental institution. (1850-1950)' in STOCKMAN, R. ed. *Neither rhyme nor reason: history of psychiatry*. Ghent. 1996. 191.

⁸ <http://www.fracarita.org/nl/europa/belgie/museum/museumonshuis.html>

⁹ VAN WAESBERGHE, 'Het Belgische krankzinnigenbeleid in de XIXde eeuw.' 95.

population of the asylum did not cease to increase in the second half of the nineteenth century and by 1901, 550 patients were taken care for in the *Hospice Guislain*.

Unfortunately not much is known about the medical superintendents who registered the patients.¹⁰ Although Guislain had seriously raised their public standing, madhouse doctors still needed to complement their meagre income with other work, often a private practice. It is unclear how often the superintendents visited the institution, but from the registers it seems as if they came in almost every day, to assess newcomers. After his death in 1860, Guislain was succeeded by his deputy Benjamin Ingels. Ingels was one of Guislain's best students and confidantes; he re-edited and added to his teacher's *Leçons orales sur les phrénopathies* in 1880. He was one of the founders of the *Société Phrénopatique* and when this organization of professional psychiatrists became in 1873 the *Société de médecine mentale de Belgique* – its new name reflecting contemporary changes in outlook – Ingels became its secretary-treasurer.¹¹ After serving in the *Guislain* hospital for almost 30 years, Ingels died a heroic medical death, in the act of gathering scientific knowledge, as a result of a blood poisoning contracted during an autopsy.¹²

His successor as medical director in the hospital in 1886 was Dr. Jules Morel. Morel was an equally important figure in Belgian psychiatry: together with Drs. Auguste Vermeulen, superintendent in the *Maison de Santé le Strop* in Ghent, and Dr. François Lentz. Morel was member of the inspection committee of Belgian mental institutions and he was to report to the minister of justice about the state of the Belgian lunatic asylums

¹⁰ For Belgium there are no such instruments as the 'Medical Register' in Britain, where practitioners were registered. When the traditional channels of biographical information, like the *Biographie Nationale*, fail, only random evidence remained.

¹¹ *B.S.M.M.B.* III, 1974. 6.

¹² STOCKMAN, 'Life within the walls of the Guislain mental institution. (1850-1950)'. 193.

in the latter years of the nineteenth century. Like so many others working in the field in the 1880's and 1890's in Belgium, Morel was interested in the relationship between degeneration, crime, and alcoholism, as his attendance of the 'Congress of Criminal Anthropology' in Brussels in 1892 demonstrates and the publications of works on recidivist criminals and specifically on alcoholism show.¹³ Jules Morel stayed on in the *Hospice Guislain* as director until 1896 when he left to take up his appointment as medical superintendent of the public asylum in Mons. He was succeeded by Dr De Moor, about whom very little is known.¹⁴

In his campaign for better care for sufferers of mental disease in Belgium, one the main reasons for Guislain's discontent was that patients from the upper ranks of society were placed on wards together with indigent patients. It was felt that the treatment they received did not correspond to their social class. On advice of Guislain, the congregation of the 'Brothers of Charity' bought in 1841 the hotel-pension *le Strop*, originally an eighteenth century summer mansion, on the banks of the River Schelde, to rebuild it as a mental hospital for paying patients. Thus in 1843 the *Maison de Santé le Strop* was

¹³ *Actes du Troisième Congrès International d'Anthropologie Criminelle. Tenu à Bruxelles en Août 1892 sous le haut patronage du gouvernement. Biologie et Sociologie.* Bruxelles. 1893. & MOREL, *Rapport sur les désastres produits par l'alcoolisme (criminalité, aliénation mentale, dégénérescence).*

¹⁴ We do not know this medical superintendent's first name. It is tempting to consider that this Dr. De Moor is perhaps Jean Demoor, professor of physiology and just before the Great War rector of the University of Brussels, who was interested in psychiatry. He founded the first 'special schools' in Brussels for 'abnormal' children in 1897. DEPAEPE, M. 'De markt van het kind. Over de medicalisering van opvoeding en onderwijs.' in NYS, L., DE SMAELE, H. a.o. eds. *De zieke natie: over de medicalisering van de samenleving, 1860-1914.* Groningen. 2002. 266-7 Jean Demoor was furthermore an important figure in the Belgian criminal anthropology and was active in the *Institut Solvay*. It seems unlikely, however, that this Dr. Demoor would have combined his post at the University with a full time position of medical superintendent in the Ghent hospital, which Dr. De Moor, according to Renée Stockman, occupied from 1895 to 1931. DURVIAUX, S. 'Le cercle universitaire pour des études criminologie' in MARY, P. & VAN DER VORST, P. eds. *Cent ans de criminologie à l'ULB.* Bruxelles. 1990. 21-44. & STOCKMAN, 'Life within the walls of the Guislain mental institution. (1850-1950)' 193.

opened, a hospital for 25 patients from the upper classes in society, on the green outskirts of the city of Ghent. It was a luxury institution where private patients were received in suites and a salon, with a library, a *salle-au-jeux* and vast gardens, with a birdcage and a fountain designed by Victor Horta.¹⁵ But here also, as was the case for the public asylum, the institution provided custodial care and had little or no curative function.¹⁶



15. *Maison de Santé le Strop*: common sitting room. s.d.

Le Strop was considered the most modern private hospital in Belgium. Guislain was official medical superintendent but the day to day running of the institution was left to Dr. Auguste Vermeulen and the Brothers. As his assistant, Vermeulen had collected and

¹⁵ LIÉGEOIS, A. 'Triest, Guislain en de broeders en zusters van liefde.' in VANDERMEERSCH, P. ed. *Psychiatrie, godsdienst en gezag: de onstaansgeschiedenis van de psychiatrie in België als paradigma*. Leuven. 1984. 191-2. & the unpublished paper MEYERS, P. *Het N.P.C. Sint-Alfons door de tijden heen 1843-1993*. Gent. 1993.

¹⁶ In his study into private mental hospitals in England, Parry-Jones similarly concluded that those institutions exerted a custodial function rather than offering medical care and cures. PARRY-JONES, W. L. *The trade in lunacy: a study of private madhouses in England in the eighteenth and nineteenth centuries*. London . 1972. 168.

noted Guislain's *Leçons de phrénopathie* in the 1840's.¹⁷ He became the president of the *Société de médecine mentale de Belgique* and he combined his position in the *maison de santé* in Ghent with the job of medical superintendent in the asylum for alienated women in Ghent run by the 'Sisters of Charity'.¹⁸ August Vermeulen was, as mentioned above, with Lentz and Morel in charge of inspection of Belgian public asylums. Vermeulen stayed on as superintendent of *le Strop* his entire life and it was only in 1896 that he was followed up by Dr. T. Maere who apart from his job as medical superintendent in the *Maison the Santé* received wealthy patients in his private practice in the Place de Marais. In 1850, *le Strop* housed 20 patients, cared for by 16 brothers and 6 servants.¹⁹ Within the asylum the patients were classified according to their social position, there were 3 classes within the institute: *supérieure*, *moyenne* and *primaire*. The principle for admission was the same as in the institutes for pauper lunatics: a medical certificate and a demand for confinement were enough to have a patient legally committed.

Both in the *Hospice Guislain* and in the *Maison de Santé le Strop*, the patients received 'moral treatment' centred on religious practice. Guislain followed ideas of Pinel and Esquirol in his therapy and he believed moral causes were more important than physical ones.²⁰ In the public asylum, the patients were expected to do work, mostly they were employed in a similar kind of activity that they were doing before they became sick. A baker would be set to work in the kitchen, a farmer in the vegetable plot and tradesmen

¹⁷ GUISLAIN a.o., *Leçons orales sur les phrénopathies : ou traité théorique et pratique des maladies mentales. Cours donné à la Clinique des Établissements d'Aliénés à Gand*. préface.

¹⁸ B.S.M.M.B. III. 1974, 6. The archives of the institutions for women in Ghent have gone missing or have not survived.

¹⁹ MEYERS, *Het N.P.C. Sint-Alfons door de tijden heen 1843-1993*.

²⁰ LIÉGEOIS, A. 'Guislain and European psychiatry.' in STOCKMAN, R. ed. *Neither rhyme nor reason: history of psychiatry*. Ghent. 1996. 98.

were to do work in various crafts workshops²¹. Also the in-house entertainment of the *Hospice Guislain* was taken care of by the inmates themselves: there was a band and processions and festive parades were organised to celebrate important religious days. In the *Maison de Santé le Strop* the rich patients were not made to do any work, although as part of the moral therapy they were encouraged to engage in all the available pastimes in the asylum: walking in the grounds, reading in the library, playing cricket and cycling²². One assumes that, especially for alcoholic patients, boredom was to be avoided at any cost.

Light beer was generally drunk at mealtimes at the *Hospice Guislain*.²³ In the *Maison de Santé le Strop* the daily copious lunch was always accompanied with half a bottle of wine and a tumbler of beer. Dinner came with another tumbler of beer. In the rules and regulations of *le Strop* from 1851, it was stated that 'the establishment only provides wine at mealtimes. All other wines were charged to the patient himself and were only to be given with the approbation of the family and the authorisation of the hospital doctor.'²⁴ At the beginning of the twentieth century, in the *Société de Médecine Mentale de Belgique*, the controversial Brussels psychiatrist Dr. Auguste Ley had initiated a discussion about the use of alcohol in the *maisons de santé* in general, 'because in Belgium alcoholics are

²¹ Whereas for psychiatric patients this seems to be a sensible practice, for alcoholics it was perhaps not as ideal. In the British Inebriety Reformatories inmates were expected to do different work that that they used to do before, because it would break the connection with their former, alcoholic way of living. HUNT, G., MELLOR, J. & TURNER, J. 'Wretched, hatless and miserably clad: women and the inebriate reformatories from 1900-1913.' *British Journal of Sociology*. XL, 1989. 244.

²² MEYERS, *Het N.P.C. Sint-Alfons door de tijden heen 1843-1993*.

²³ STOCKMAN, R. 'De betekenis van Joseph Guislain op juridisch and sociaal vlak.' in *Met recht en rede. Waanzin tussen wet en kabinet* Gent. 1998. 76.

²⁴ MEYERS, *Het N.P.C. Sint-Alfons door de tijden heen 1843-1993*.

treated for the majority in the same institutes as lunatics.²⁵ In his own sanatorium in Uccle alcohol was absolutely forbidden, and he argued for complete abstinence, not only for the patients, but also for the staff. This and other radical progressive reforms he proposed, were defied by his own staff and when they consequently all resigned, Ley had to find new personnel in more progressive Holland.²⁶ Whereas in other countries, complete abstinence had been for years preferred practice in asylums, in Belgium, a similar scheme led to controversies and was viewed as too radical. ²⁷ Gin was also offered as treatment in the Ghent asylums for sufferers of chronic alcoholism. Because it was considered dangerous to abstain at once, alcoholics were treated with a glass of gin. By the last decade of the century, however, the patient registers indicate that total abstinence was the treatment of choice for alcoholism.

i. Drunkenness in the patient registers in the Ghent asylums

When patients were admitted to the asylum their details were recorded in special registers. Those registers of the *Hospice Guislain* and the *Maison de Santé le Strop* provide a unique insight in the relationship between insanity and drunkenness. The registration books are kept in the 'Museum Guislain', in the original nineteenth century building, still today a working psychiatric hospital, but are not catalogued. They are numbered as they were originally by those who compiled them, but this numbering is often inconsistent. In spite of the problematic access to the records – not-classified and

²⁵ BOULANGER, Dr. 'L' alcool dans des asiles des aliénés.' in *B.S.M.M.B.* CXLVI-CXLVII, août - oct 1909. 359.

²⁶ DE RUYVER, B. & GOETHALS, J. 'Auguste Ley 1873-1956' in FIJNAUT, C. ed. *Gestalten uit het verleden. 32 voorgangers in de rechtswetenschap, de strafrechtpleging en de criminologie.* Deurne. 1993. 187. & LEY, A. *Rapport sur le service médicale du Santarium du Fort Jaco, à Uccle en 1908.* Bruxelles. 1908. 13.

²⁷ Thanks to Dr. Lars Anderson for pointing this out see eg. William Tuke on beer in asylums in Britain in *Journal of Mental Science* vol 30 535, 1884-85. & *Le Scalpel.*, 22 April, 1900.

unordered – within the desert of available information on drunkenness in Belgium these documents proved a goldmine. In fact, the registers are surrounded, as so often for Belgian historical collections, with countless cardboard boxes filled with more unexamined and un-catalogued documents, holding secrets about the past of the institutions and its inhabitants.²⁸

The keeping of the registers was the result of the Lunacy Law of 1850. The responsible authority in the hospital, the medical superintendent, had to provide the magistrate [*Procureur du Roi*] with details about the course of the condition of the newly arrived patient in an official register for at least the first five days of his stay in the hospital. After a patient was received in the asylum by an order of the family or the town council and a valid medical certificate and kept for five days of observation, the physician needed to make an official diagnosis and had to decide if the demand for confinement could be confirmed. The sixth day he had to send his decision to the magistrate who verified the verdict or overturned it.²⁹ From the evidence it seems that he last never happened, unless the patient himself filed a complaint against his incarceration.

Based on an interview with the newly arrived patient, and often also with his family, particulars were written down on a double page of a specially pre-printed *livre de clinique*. On the left page, space was provided to enter the personal details of the patient: his profession, age, place of birth and residence, if he was married and had children etc. Before 1875, the complementary information asked in the book is very general; 'drunkenness' was regularly filled in there where the register asked for general 'causes'

²⁸ I need to thank Frederik De Preester at the Guislain Museum in Ghent for his help in showing me the archives.

²⁹ STOCKMAN, R. 'De wet op de krankzinnigenzorg 1850-1873.' *Psychiatrie - Verpleging. Tijdschrift voor psychiatrisch verpleegkundigen*. I, 1989. 35.

of the disease. In the mid 1870's the layout of the registers changed, both for the *Hospice Guislain* and for the *Maison de Santé le Strop*. There were now many more pre-printed categories the treating physician had to fill in. After question 28 had assessed the 'presumed and predominant cause' of the affliction, the question immediate following asked explicitly if there had been any 'abuse of alcoholic drinks'. In the 1890's the layout of the *livre de clinique* for both institutions changed once more. The pre-printed questions to be answered became still more detailed and specific; the possible choices more pre-determined. Especially remarkable is that under the new heading *antécédents*, this time, in first instance, *hérédité* was inquired about. The doctor was expected to write down if in the family of the patient there were cases of mental illness or indeed, alcoholism. Question 4 under *antécédents* was about the 'harmful influences and predominant causes'. Among this section the options were 'alcoholism or other empoisoning, onanism, venereal excesses, exhaustion, emotions, fears, sorrows, misery or overwork.'

This gradual addition in the pre-printed lay-out of the patient registers of potential 'options' for the predisposing causes of madness underlined the rising confidence and general agreement of the psychiatric profession about their medical practice. The physical printing of the classification in the registers, confirmed the categories of the psychiatrists as constant and objective 'facts'. Excessive drinking acquired a more specific place and stable position at the centre of the aetiology of madness. That one of the standard questions the doctor had to ask to every newly entered patient was if he 'abused alcoholic drinks', underlined that particular preconception. For many patients the answer to the question was simply *oui* and it was also recorded as such. This affirmation then simply served as an extra confirmation of the mental imbalance of the particular patient, while his drinking habits were not further mentioned as related to the disease and its course in any other ways. Towards the end of the century, drinking

unmistakably became gradually more prominent in the 'official opinion' on madness as expressed by the authorities and the medical elites, who fabricated the standard composition of the registers. The significance ascribed to the drinking habits of the patients and their families, provides insight into the thinking patterns of authorities and medical specialists, convinced that alcohol had a predisposing role in the genesis of madness.

The right hand page of the patient registers always provided space to note the details of the course of the disease and the treatment that was offered. The amount of information given apart from the first five days about the further evolution of the disease or about the followed treatment, differed. Like Jonathan Andrews has noted, studying the case notes of the Gartnavel Royal Asylum in Glasgow, also in Ghent the precision with which the registers were filled in was very disparate.³⁰ Some patients provided much information about their drinking habits and background while about others not much was imparted. Sometimes the symptoms were probably so straightforward that there was no need for much explanation and only the final diagnose: *alcoolisme* for example, was written down. Others patient histories were observed more elaborately. It is striking, but hardly surprising, that the registers of the wealthy patients of the *Maison de Santé le Strop* were kept with much more accuracy and rigour than those of the ordinary, working class cases in the *Hospice Guislain*.

The careful reading of the entries in the registers was 'a Herculean task'.³¹ For the study of the lower class asylum, the *Hospice Guislain*, I systematically combed out 9 of the

³⁰ ANDREWS, 'Documents and sources. Case notes, case histories and the patient's experience of insanity at Gartnavel Royal Asylum, Glasgow, in the nineteenth century.' 258.

³¹ RISSE, G. B. & WARNER, J. H. 'Reconstructing clinical activities: patient records in medical history.' *Social History of Medicine*. V, 2004. 196.

registry books of different lengths, a sample of the total of 29 covering the period 1850-1914 to find references to drunkenness and alcoholism, altogether I looked at 1767 admissions.³² The same strategy was applied for *le Strop*, but because there were far fewer patients in this institution, I was able to look at the entire collection of patient registrations from 1850 to 1914. In 16 *livres de clinique*, of very different lengths, 1172 entries were registered.³³

But not only was the extent of the information in the registers enormous to take in, the content of the books proved equally a complicated source to work with, because of a range of problems of evaluating the gathered information.³⁴ Jonathan Andrews has called attention to these problems and states that case notes and patient registers are

³² This is non-catalogued archive: there are numbers on the spines of each volumes and an indication of the corresponding patient numbers in each volume, probably based on number given at admission in the *Registre Matricule*. Apart from the *Registres Médicales*, which hold the clinical information of the patients, for both hospitals, also the *Registres Matricules* survive, which hold information about who asked for the incarceration and the name of the doctor who wrote the medical certificate. In the earlier volumes of the medical registers, however, the number given to the patients by the registering doctor, started from 1 for each new volume and is thus not according to the numbering on the cover of the volume. I annotated the registers based on the marking on the spine. see bibliographie p. 344.

³³ This is again non-catalogued archive kept in the museum Guislain in Ghent, which I will call *Archive St. Alfons*. (*St. Alfons* is the name the *Maison de Santé le Strop* received after the Second World War as it still exists today) The entire registry from 1850 until the First World War consists of 16 volumes with a varying number of entries per book. These archives were never numbered or organised and they carry the original numbering, which is not consequent and confusing. When there was not numbering on the spine, I continued between brackets [...] with the former numbering. see bibliographie p.344.

³⁴ RADKAU, J. 'The neurasthenic experience in Imperial Germany: expeditions into patients records and side-looks upon general history.' in GIJSWIJT-HOFSTRA, M. & PORTER, R. eds. *Cultures of neurasthenia from Beard to the First World War*. Amsterdam. 2001. 204.

'innately jaundiced': they give us rather insight into the mental universe of the practitioner who compiled them, than into the world of the patients.³⁵

The unequal relationship of power between the doctor, who asked the questions and wrote the answers down, and the patient, who was to answer, is very prominent in the Ghent registers. The questions were asked, sometimes in a suggestive way and the medical superintendent added immediate opinions and interpretations of what was said. The class and status difference between patient and doctors was especially noticeable in the registers of the *Hospice Guislain*, where language added an extra layer of prejudice to the source. The patients who were admitted to the public asylum, working-class *Ghentenaers* or seasonal workers in the neighbouring villages spoke Flemish, or rather their Flemish dialect, and the interview was certainly conducted in that language. The 'official' language of the medical superintendent was, however, French and that was also the language in which the registers were compiled. Here, as always in Belgian history, class and language were closely connected. The bourgeois doctors, were certainly speaking and writing in French, but they did understand and could speak Flemish. Charles Baudelaire observed about the Belgian bourgeoisie: 'they all pretend not to speak Flemish, it shows good taste. The evidence that they do know how to speak Flemish very well, is shown when they yell at their servants.'³⁶ A similar uneven relationship was played out here in the asylum during the interview between patient and doctor, who by translating the patient's Flemish working class experience into

³⁵ ANDREWS, 'Documents and sources. Case notes, case histories and the patient's experience of insanity at Gartnavel Royal Asylum, Glasgow, in the nineteenth century.' 265.

³⁶ BAUDELAIRE, *Arm België*. 65.

French written language, the language of reason and science. These so-called 'regimes of silence', reinforced medical authority and confirmed the uneven power relationship.³⁷

But although the relationships were uneven, the patient registers were always the outcome of 'complex negotiated exchanges', between different actors, offering also a perception into the part the drunkard himself and his family played in those negotiations.³⁸ The collected stories from drunkards in the asylum comment on more than just on themselves, they tell, even if in an incomplete way, about the culture in which they came into being.³⁹

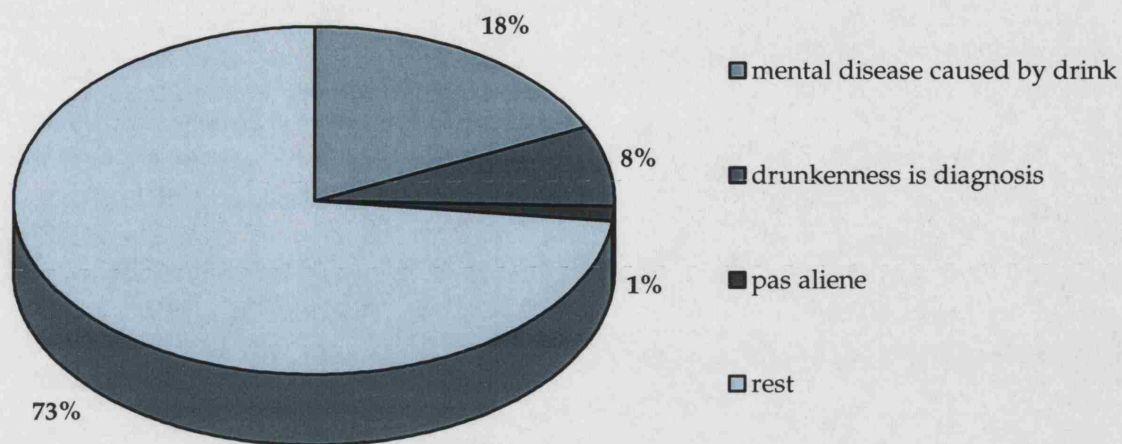
ii. Drunkards in the Ghent asylums

From the evidence in the registers, it becomes apparent at once that drunkenness was, in both the *Hospice Guislain* and the *Maison de Santé le Strop*, always a prominent concern. In almost 500 of the sample of at the *Hospice Guislain*, excessive drinking was implied in the assessment: this is almost 3 in 10 cases. And – in spite of the continual repetition in public and medical debates, that drinking was the scourge of the working classes – alcohol was prominent in 17% of the entries among the wealthy patients in *le Strop*.

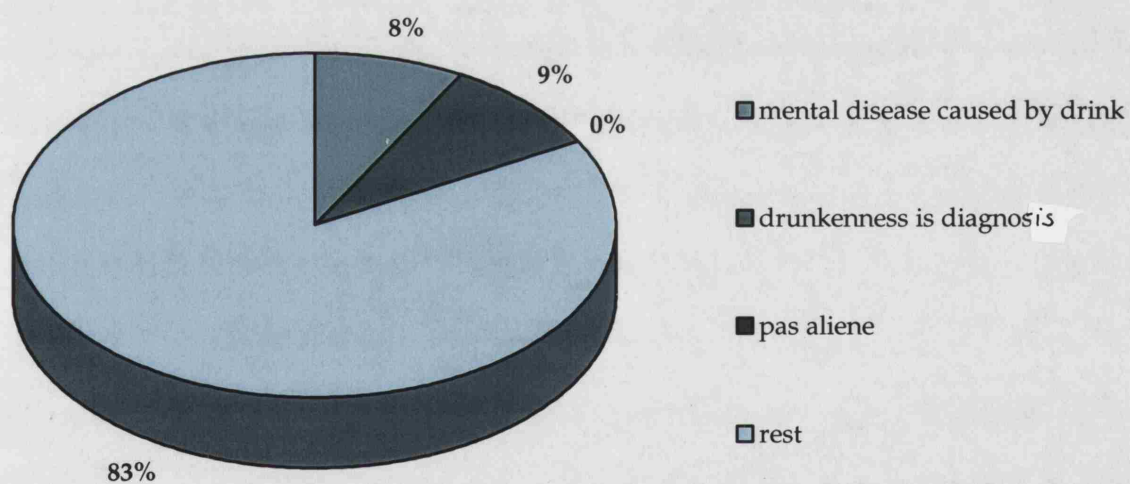
³⁷ HORROCKS, C., JEVTIC, Z. & APPIGNANESI, R. *Introducing Foucault*. Cambridge. 1997. 46.

³⁸ PORTER, 'The patient's view. Doing medical history from below.' 192.

³⁹ GEERTZ, 'Thick description. Towards an interpretation theory of culture.' 23-29.



16. Graph 1. *Hospice Guislain*: all admissions



17. Graph 2. *Maison de Santé le Strop*: all admissions

If the period is divided up, an increase in the awareness of alcohol abuse in general can be clearly detected in the admission records: In the period 1851-1883 in *le Strop* 14.6% of the admissions were related to alcoholism, in the period 1883-1914, it had become 18.5%. In the lower class asylum, the rise was ever more dramatic: from 21.8% of registrations in the *Hospice Guislain* where alcohol was implicated for the period 1851-1885, it became 30.4%, for the period 1885-1909.⁴⁰

The admissions where alcohol played a part in the assessment of the patient's problem, can be divided up in two main groups. Firstly there were those admissions where excessive drinking was considered as the direct or indirect cause or a contributory factor in a mental disorder. While in only 8% of the entries in the private hospital, the *Maison de Santé le Strop* alcohol was seen as a cause of madness, it was mentioned in 18% of the registrations in the public asylum *Hospice Guislain* as a contributing factor. Drinking, especially when it was hereditary, became a way to explain the genesis of otherwise inexplicable problems. Dr. Jules Morel found it for example imperative to mention that the mother of a day labourer diagnosed as suffering from 'dementia', was 'a drunk' [*une ivrogne*] and that the patient himself used to drink 'a lot of gin'. He even specified the amounts: 'four glasses during weekdays and six or more on Sunday'.⁴¹ The patients from the poorer layers of society housed in the *Hospice Guislain*, were often recorded as leading 'irregular lives'. Time after time the answer to the question 'do you indulge in excessive drinking' had to be a straightforward 'yes', as numerous working class individuals had regular encounters with drunkenness, especially at the weekend. In many cases where drinking was recorded as important in the aetiology of their disease,

⁴⁰ See Graph.1 *Hospice Guislain*: all admissions and Graph. 2. *Maison de Santé le Strop*: all admissions. p. 191.

⁴¹ F.G.R.M.16, 5261, 3 févr. 1888.

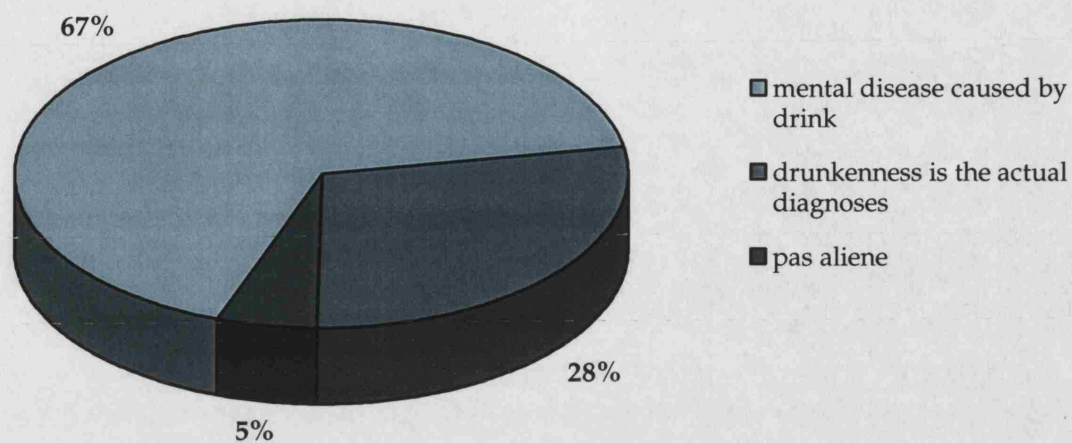
the patients were old and suffered from mental problems related to their age, had become unmanageable, but had nowhere to go. Often their complaints would be associated with histories of heavy drinking, as in the case of a seventy three year old factory labourer who suffered from 'senile dementia' and whereby 'not a single Sunday had passed over the last few years without alcoholic excess.'⁴²

But it is the other, smaller group of patients that are of most interest for the cultural understanding of drunkenness and psychiatry. It concerns those patients who were admitted to the hospital specifically because of their excessive drinking habits. Drunkenness in one or another form here constituted the diagnosis. About 15% of the patients in both Ghent asylums together were diagnosed with some form of alcoholism.⁴³ Over the period 1850 to 1914, of the sample of admissions, about 8% in the *Hospice Guislain* were recorded as 'alcoholic'. Over the same period, 9% of all of the admissions of wealthy patients in the *Maison de Santé le Strop* over the same period were in the asylum just because of their excessive drinking habits.⁴⁴

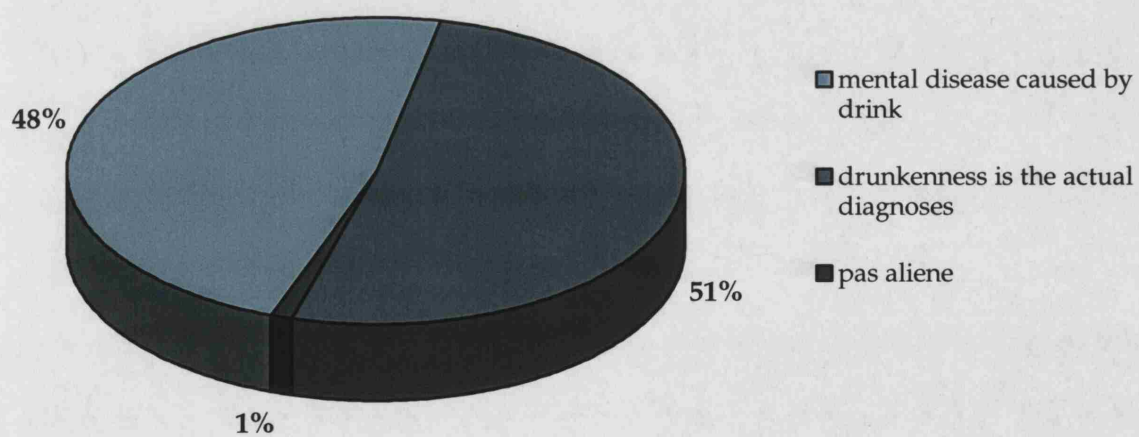
⁴² F.G.R.M. 16, 5294, 13 juin, 1888.

⁴³ Prestwich has calculated that for the French public asylums diagnoses of alcoholism made up 23.8% of the male admissions and that in 7.3 % of the cases alcohol was listed as a contributing factor. This seems a much higher number of alcoholics in the Paris than in Ghent's public asylum, but it is not clear if she has made the division between patients for whom alcohol was considered a contributory factor to mental disease and those for whom alcoholism formed part of the final diagnosis. PRESTWICH, 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' 120.

⁴⁴ See Graph. 3. *Hospice Guislain*: admissions involving alcohol. & Graph. 4. *Maison de Santé le Strop*: admissions involving alcohol. p. 194.



18. Graph 3. *Hospice Guislain*: admissions involving alcohol



19. Graph 4. *Maison de Santé le Strop*: admissions involving alcohol

Comparing those numbers with those of the admissions where alcohol was not the disease itself, but only a cause, reveals striking differences between the two institutions. When all the admissions involving drink are looked at together, in the *Hospice Guislain*, it was a minority that were admitted specifically because of drinking problems or, in other words, where drunkenness in one or another form was considered the mental problem which needed care. Then there were still 25 men who had entered the *Hospice Guislain* drunk, but were sent home immediately as *non-aliéné*: not mad, just drunk. In the upper class asylum, from the other hand, the proportions were completely different. There, just about the majority of alcohol-related admissions were cases where the alcohol problem itself was considered the mental disorder, which had led to incarceration. Also, in the *Maison de Santé*, only two drunken patients had been rejected as not mad but just drunk.⁴⁵

From these figures it can be concluded that excessive drinking was clearly more frequently diagnosed as a mental disease, as a form of madness and a reason for a stay in the asylum, among patients from the upper classes than it was among the poor patients. Among the latter, excessive drinking was more generally identified as a contributing factor for other mental health problems, while they were also more frequently sent away as not belonging in the asylum. Or, on average relatively more alcoholics were taken in and treated in the *Maison de Santé le Strop* than were recognised in the *Hospice Guislain*.

b. Case-histories: the patients and the doctors

Arthur B. was in his thirties and trapped in a bad marriage when he had started drinking. He had moved back in with his parents, an arrangement that proved not

⁴⁵ See Graph.1 *Hospice Guislain*: all admissions and Graph. 2. *Maison de Santé le Strop*: all admissions. p. 191.

viable, until his brother finally asked for his placement in the *Maison de Santé le Strop*. In the hospital Dr. Maere diagnosed Arthur with *alcoolisme chronique*. On the second day of his stay in the asylum, he started immediately to write a letter to his parents to ask for forgiveness for his bad behaviour and he promised to change. As part of the 'moral treatment', patients were systematically urged to write letters apologising to their family members for their behaviour. The therapy proved successful as six months later he was sober again and his brother signed him out again. Because he had nowhere to go, his parents decided to rent a room for him in the *Hotel de Luxembourg* in Antwerp; a plan that was received with scepticism by Dr. Maere, who thought it a 'strange idea to bring such a patient to a hotel.'⁴⁶ His doubts proved right: six months later Arthur was back again at the *Maison de Santé le Strop*. This time he was diagnosed after 5 days observation with *dipsomanie insociable*.

A year later he was still in the *Maison de Santé*, but found it hard to accept the rules and regulations. He wrote to the magistrate to ask for his release, claiming he did not suffer from mental aberration. But the medical superintendent justified his incarceration as follows: 'This patient is a degenerate who had drunk excessively and has committed *multiple extravagances*'. His parents do not want to receive him anymore and look for a convenient place where he could stay. [He] lacks the will, the energy and especially the professional occupation and he will start drinking again. [...] I believe that one has to find, together with the parents, a suitable place where he can be completely abstinent.'⁴⁷

The story of Arthur B. is a typical case of desperation in the face of addiction. It shows essential aspects of drunkenness in the asylum, which I will subsequently assess and

⁴⁶ *Fonds St. Alfons* Registre Médical. [F] 1179, 7 juin 1910.

⁴⁷ *F.S.R.M.* [G] 1203, 14 juin 1911.

illustrate with other examples from the registers. It demonstrates firstly that families often found it hard to take care of drunkards and that incarceration in an asylum was often the last option left to them. Such instances of institutionalisation and forced detention of drunkards, however, raised many questions of free will, personal liberty and repression.

Also, the concern about Arthur's *extravagances* shows how rather the unacceptable social behaviour that accompanied drinking was considered problematic, than the drinking itself. I will try to understand how the relationship between drunkenness and madness, or the 'deviant behaviour', was defined within shifting and culturally defined boundaries of tolerance. The patient's position in society before he entered the hospital and his behaviour in the asylum, established and understood through processes of interpretation and negotiation, helped to construct those boundaries.⁴⁸ Arthur B.'s conduct, refusing to follow the rules of the institution, reveals how the 'performance' of patients always proved essential in the evaluation of their case. That 'performance' of the patient, or what Erving Goffman has called his 'moral career' and the assessment of it, was constructed within the particular power relationships of the asylum.⁴⁹ Although the doctors had the last word on diagnosis and treatment, it was expected from the patient that he would examine himself, confess and show remorse.⁵⁰

With this in mind I subsequently want to analyse the complex negotiations between different parties involved that would contribute towards the medical superintendent's final diagnosis. The change in the diagnoses the medical superintendent reserved for

⁴⁸ PFOHL, S. J. *Images of deviance and social control: a sociological history*. New York. 1985. 293.

⁴⁹ GOFFMAN, E. *Stigma: notes on the management of spoiled identity*. Touchstone. 1963. 9.

⁵⁰ FOUCAULT, M., BAUDOT, A. & COUCHMAN, J. 'About the concept of the 'dangerous individual' in 19th-century legal psychiatry.' *International Journal of Law and Psychiatry*. 1, 1, February, 1978. 2.

Arthur B.: from a general 'alcoholism' towards a more medicalised 'dipsomania' indicates that those diagnoses were changeable. I would like to map out how specific diagnoses came about and why different patients with similar symptoms were ultimately assessed differently. Arthur's story moreover confirms that medical treatment of alcoholism often failed, because of the nature of the problem, illustrating the difficulties and ambiguity of attempts at the medicalisation of drunkenness. Finally I want to ask why patients like Arthur were called 'degenerate' and more generally how new medical ideas about the nature of the drunkard, related to issues of heredity and formulated within theories of degeneration, found their way into the registers.

The assessment of drunkenness in the asylum demonstrates the way in which medical theories contain social and ideological meanings and how 'social and ideological meanings implicit in science were redefined according to social contexts'.⁵¹ Such medical theories reflected meanings imposed on drunkenness and at the same time helped to create them within those social contexts, those cultural categories that informed social relationships.

i. Power and control

The possible reasons why a drinker was brought to the asylum were manifold. Most of the drunkards whose case was considered suitable for admission in asylum were more than just drunk and it was other behaviour that accompanied the drinking that led to their admission. Many among those sent to the public asylum were violent when drunk. The police would bring unruly drunkards to the *Hospice Guislain* and they were often in a quite excitable state while suffering from a drunken spell. Sometimes incarceration in a

⁵¹ COOTER, *The cultural meaning of popular science: phrenology and the organization of consent in nineteenth-century Britain*. 9.

hospital seemed the last resort for irreclaimable drunkards who were repeatedly arrested for drunkenness. One man was brought to the *Guislain* asylum after being arrested for 71 times for public drunkenness.⁵²

Public authorities made the demand for incarceration mostly after repeated complaints by neighbours. Also family members could apply for incarceration. The assessment of both local authorities and families was predominantly based on ideas of 'dangerousness', the same concept that had also motivated the law on lunacy of 1850 and 1873. 'Dangerousness' was the main argument used by the authorities to justify incarceration.⁵³ Patricia Prestwich concluded that in the French situation 'for alcoholics, [...] asylum legislation functioned as a device for maintaining public order.'⁵⁴ In Belgium, as the Ghent evidence shows, the same was true.

In the Ghent asylums there are multiple examples of alcoholics who were violent when drunk, mostly among the poor patients in the *Guislain* asylum, but also among the rich. When sobered up, however, they had to be sent back home again. Indeed, the temporary madness that had led the drunkard to the asylum would pass and technically the person was no longer insane and could therefore not be kept in the asylum. A wealthy and educated cotton merchant from Lokeren who often overindulged in wine was a violent alcoholic. His wife had to flee the home with their child. In July 1881, the town council issued an order for his internment as a lunatic, and he was brought to the *Maison de Santé le Strop* by the police sergeant. But after 10 days of observation, the medical

⁵² F.G.R.M. 27, 7091, 23 juillet 1907.

⁵³ FOUCAULT, BAUDOT & COUCHMAN, 'About the concept of the 'dangerous individual' in 19th-century legal psychiatry.' 1-18.

⁵⁴ PRESTWICH, 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' 120.

superintendent had to admit that the only symptoms he could notice with this patient were signs of nervousness and a heightened sensitivity. 'Not in his deeds, nor in his words can I find sufficient grounds to prolong his stay in the asylum and I feel that our resident has to be liberated.'⁵⁵

The constant concern of the medical establishment to assign 'ordinary' drunkenness as a cause of mental disorder among lower class patients, who were systematically recorded as leading 'irregular lives', is symptomatic of their preoccupation with 'dangerousness'. The bourgeois panic in the face of the rise of the political awareness of the working class – the drinking class – played in the Ghent asylums an important role in the blurring of the boundaries between healthy and sick, drunk and mad. The *cabaret* and its dealings were seen as emblematic of a growing working-class political awareness and public, violent drunkenness became a metaphor for possible irrational mob uprisings. While this fear can be read between the lines of the rational, scientific language of the medical specialists, the same panic was sometimes explicitly and immediately expressed by patients in the upper class asylum, when rationality and the conscious mind were cast off in drunken passion.

One wealthy inhabitant of Ghent came to the *Maison de Santé le Strop* in November 1894 in the midst of an attack of delirium tremens. He was completely out of his mind, noted superintendent Vermeulen, believing that the socialists had destroyed his house and he raved about them shooting in the suburbs of Antwerp.⁵⁶ But his terror, expressed in the delirium, was real. In Antwerp in April of that year, the workers *had* come out on the streets demanding the vote. Repression of the march had led to violence with deaths and

⁵⁵ F.S.R.M. G 91, 2 Juillet 1881. & *Fonds St. Alfons* Registre Matricule. [B] 91.

⁵⁶ F.S.R.M. D. 10 nov, 1894.

wounded as a result.⁵⁷ The immense psychological impact that the rise of the socialist movement made on the mind of the Belgian bourgeoisie is remarkably demonstrated in this case. Moreover, through his excessive drinking, this patient had abandoned the bourgeois positivist ideal of rationality and control on which a hegemonic identity was based. He now behaved himself as an unreasonable worker, himself, thereby overstepping all-important boundaries and mixing up fundamental cultural categories. This instance is a very direct example of fear for the rise of the working class taking hold of the bourgeois. The irrationality and unruly behaviour of the inhabitants of the asylum, caused by drink, became a symbol for the challenge to common sense assumptions about power and control that was happening on the streets of the Belgian cities, allegedly equally originated by drink.

In the Ghent public asylum all patients, not just drunkards, were only admitted when they posed a threat to the safety of society. But with those who arrived drunk and aggressive, the violent attacks caused by alcohol generally subsided after a few days of moderate drinking or abstinence. After 5 days observation, the medical superintendent of the *Hospice Guislain* declared that a 30 year-old confectioner did not present 'any of the symptoms of maniacal violence which had led to his incarceration since he has abstained from alcoholic drinks'. The logical and only conclusion for the treating physician was to let him go: 'therefore he cannot be kept under confinement at least not if it cannot be established that he indulges habitually in alcohol and loses his reason as a result hereof.'⁵⁸ Because, only if it could be shown, by medical observation or based on the

⁵⁷ DENECKERE, G. *Sire, het volk mort: sociaal protest in België, 1831-1918*. Gent. 1997. 295.

⁵⁸ *F.G.R.M.* 15, 4822, 27 juin 1881.

statement of the family that someone was a habitual drunkard, could he be legally detained in the asylum, based on what was set out in the ministerial brief of 1867.

In a social environment where the meanings of drunkenness were vague and constantly shifting, it was very difficult to establish whether a person was just often drunk or a habitual drunkard. It was unclear when and how drunkenness and alcoholism could become a valid reason for incarceration in the asylum. Like lunacy, alcoholism was a difficult diagnosis, a judgement for which people had to rely on the expertise of doctors. And where eccentricity could be confounded with lunacy, there was always the concern that convivial drinking would be taken for habitual drunkenness or that the effects of excesses of a night on the town could be interpreted as pathological delirium. The superintendent often referred to the *Circulaire Ministrielle*, the ministerial document, to justify his decision to have a patient formally incarcerated. The patients could file a complaint with the magistrate against their confinement, but as many among them, especially in the *Hospice Guislain*, were illiterate and badly informed, this protection of liberty seemed to exist for most cases only on paper. Nevertheless there were a few examples of men who were arrested for public drunkenness and transferred to the asylum by the police that were declared *non-aliéné* after having written a letter of complaint to the magistrate. Some patients in the upper class asylum fought long epistolary battles to be released. Their campaigns were sometimes successful, but mostly fruitless.

Many inhabitants of both asylums protested against their incarceration, if not formally then at least vocally in complaints to the superintendent. Apart from those that were immediately brought by the police for the disturbance of the peace, mostly lower class cases, the police was also in charge of bringing those to the asylum who were declared insane by an order of family or town council and a medical certificate. Some

protested violently when they were taken away to the asylum: behaviour that only aggravated the claim for incarceration. The police or those who were responsible for bringing the patients to the asylum did not shun violence: a farmer arrived with bruises all over his face when he arrived, after a fight with the *conducteurs* who had to bring him.⁵⁹

Sometimes patients were not happy with the type of the asylum to which they were admitted in. In the beginning of 1900, a master saddle maker, was brought to the *Hospice Guislain* by the police with a court order after complaints by the neighbours about his violent behaviour when drunk. As a petit bourgeois tradesman, this patient would fall in social rank just in between the private asylum, which he could find difficult to pay for, and the public asylum, which housed working class people he considered beneath his social rank. He himself objected to his incarceration in the public asylum and demanded a 'change of milieu'. He told the superintendent he could not possibly stay 'among these vagrants and crooks, who possess not a grain of intelligence.' The petit-bourgeois saddlemaker found it essential to distinguish himself from those he considered socially beneath himself. Interestingly, while his complaint was being considered, he perhaps managed to convince the management that he was able to pay the fees of the private asylum and he was transferred to the *Maison de Santé le Strop*.⁶⁰

Whereas the asylum was perhaps not a perfect environment for an alcoholic and it was questionable if he in fact really 'belonged' behind asylum bars, it was often the only possible answer to addiction. It could be extremely hard and testing for the family to take care of a drunk family member and since such special institutions as existed in other

⁵⁹ F.G.R.M. 18, 5845, 4 dec. 1894.

⁶⁰ F.G.R.M. 21, 6317, 12 jan 1900.

countries were not provided in Belgium, the lunatic asylum or the *maison de santé* was often the only place to go. Because of the nature of their problem, many drinkers that left the asylum 'cured', relapsed and were re-admitted, some repeatedly. 22 patients in both asylums were admitted twice, and some came back as often as 5 times.⁶¹

One insurance broker of Mont-St. Amand was an 'electoral agent' and during the elections he always succumbed to drink. In the period leading to the elections of 1912 it had happened again. The political meetings were held in cafes and public houses and so he consumed large amounts of alcohol during these occasions. He was diagnosed in *le Strop* with 'dipsomania on the occasion of the electoral period', and left after a month already with a question mark behind the decision 'cured? like every alcoholic'.⁶² There were many more examples of patients who had fallen victim to an environment where alcohol was ubiquitous and who had become alcoholics because of a social life in which drinking was deeply imbedded. Many who were taken care of in the asylum were pub landlords and there was a striking number of alcoholic brewers or brewer assistants.

Patricia Prestwich and also David Wright, have argued for the importance of the role of the family in the decision to resort to asylum care for their 'insane' family members.⁶³ To understand this role, Wright suggests combining hospital records with census returns and to assess the position of the detained within the family unit, before and after

⁶¹ over the period looked at, 7 patients were re-admitted 3 times, 3 in the *Guislain* asylum and 4 in *le Strop*, two 4 times in the *Guislain* institute, 3 five times, of which two in *le Strop*, and one patient was readmitted 6 times in the *Hospice Guislain*.

⁶² F.S.R.M. [G] 1223, 14 juin 1912.

⁶³ PRESTWICH, P. E. 'Family strategies and medical power: 'Voluntary' committal in a Parisian asylum, 1876-1914.' *Journal of Social History*. XXVII, 1993. 798-819. & WRIGHT, D. 'Discussion point. Getting out of the asylum: understanding the confinement of the insane in the nineteenth century.' *Social History of Medicine*. X, 1, 1997. 137-155.

internment. Unfortunately, for the Belgian situation, no census information is available for the nineteenth century. The registers from Ghent, however, have a section where it is noted who has applied for the admission and also the *registres matricules* that sometimes accompanied the registers mention who was responsible for the demand. Also from the story the inmates tell, or from the declarations from family members, written down by the superintendent, we get glimpses of the role of the family. From this, it can be concluded that, indeed, families had a major role in the decision on the internment of their drunken fathers, sons or brothers.

In most cases whereby patients were brought to the asylum at the demand of their family, it was predominately at the request of their wives. Incarceration into the asylum often seemed the only possibility to protect the family from domestic violence. The wife of a violent shopkeeper had tried for months in vain to have her husband admitted to the asylum. He had been confined before, but had started drinking again and his violent attacks had also returned. The relapsed shopkeeper now threatened to assault the family doctor who had written the original certificate if he would set foot again in the house and he swore to hurt his wife when she would introduce a new doctor. Against all odds, the wife finally did manage to obtain another certificate and her husband was confined.⁶⁴

It was often the wives of the alcoholics who applied for their committal when it had become impossible to live with the drunkard's often aggressive ways, ironically, it was mostly the same wives who came to 'reclaim' their husbands and take them back home again, even when the medical staff judged them not yet cured. When it was a family-member who had demanded the admission, he or she also had the right to reclaim the patient at any given moment. Because these drunkards as husbands and fathers of

⁶⁴ F.G.R.M. 18, 5714, 10 avril 1893.

working class families were the most important breadwinners, the family needed their wages in order to survive. In many stories in the *Hospice Guislain* registers, the wife came to find her husband after a few days, when he was calmed down, because the family needed the income from the breadwinner.

In general wives of alcoholics in the upper classes had a bit more freedom than their counterparts in the working classes. Mieke Claes pointed out that while a wealthy wife of a violent and drunken husband could demand a divorce requiring the husband to pay maintenance for her household and her children, for working class women such an elaborate judicial procedure was in practice unattainable.⁶⁵ However, habitual drunkenness and violence that accompanied it of one of the partners, was not generally accepted as a reason for divorce by Belgian judges, although there had been the rare case where for wealthy women the 'true scandals' that drunkenness had provoked were interpreted as a 'gross insult' which could be a justification for divorce.⁶⁶ But before going as far a divorce, a very drastic measure indeed, the Lunacy Law provided women certain powers to have their drunken husbands committed when they became a threat to domestic peace. Having their squandering alcoholic husbands declared insane could for wealthy women be a last resort to safeguard their fortune and avoid financial and social ruin.

While wives of alcoholics in the middle and upper classes often enjoyed more financial freedom than their working class sisters as they were not dependant on their husband's income to make ends meet, in their case, the social rules of respectability often restricted

⁶⁵ CLAES, 'Il est impossible d'être féministe sans être antialcoolique': Marie Parent (1853-1935) een voorvechtster in de strijd tegen alcoholisme. 45.

⁶⁶ *Het volksgeluk*. februari 1911. 13.

their actions. The looming consequences of the loss of the all-important social respectability through drunkenness and the association with madness prevented many from having their husbands or sons admitted to the asylum. As was the case for madness, the move to institutional care was always a last resort.⁶⁷ Many wives, sisters and mothers opted to take care of their alcoholic family members in the privacy of the home until the very last moment. This is shown in the case of a wealthy building contractor from Bruges who had started drinking after financial misfortune. He had squandered what was left of the family fortune and had become increasingly violent as a result of his addiction. His wife decided that she was no longer able to deal with his fits and consequently made the bold decision to abandon him. But unable to be left to his own devices, the drunkard was then taken care of by his sister. But in spite of the strictest surveillance, he still managed to succumb to 'his favourite passion'. Once under the influence he always menaced and threatened his family. Finally the sister also decided she could not handle his excesses anymore and asked for his admission in the *Maison de Santé*.⁶⁸

Some alcoholics, mostly those of wealthier background presented themselves voluntarily at the asylum, as it was the only place where they could undergo a detoxification treatment. A French businessman came to Ghent in August 1897 after he had tried in vain to kick the habit there several times beforehand. This time he gave the consent for his committal and legal admission by his wife. A special arrangement was made in order to weaken the inevitable link with lunacy: it was agreed with the family that he would stay in the *Maison de Santé* to do a hydropathic cure and to rest in order to 'habituate

⁶⁷ MACKENZIE, C. *Psychiatry for the rich: a history of Ticehurst Private Asylum, 1792-1917*. London. 1992. 102

⁶⁸ F.S.R.M. G. 88, 3 mai 1881.

himself to abstain from alcoholic beverages', but unlike other patients, he would be allowed to go in and out at his own responsibility. The doctors stated clearly in his record: '[he] is not a *malade d'esprit* in the real sense of the word: he is unbalanced [*déséquilibré*] as a result of alcoholism.' Very soon, however, the agreed arrangement fell through. By the end of September, the businessman had given in to his cravings, which had led to '*libations copieuses*' in town. His wife now intervened immediately and took her husband back home again; not because he was the much needed breadwinner, but because of fears of lack of discretion and loss of respectability for the family⁶⁹.

Those who came to present themselves voluntarily understood the burden their problem placed upon their families. A rich brewer who had been drinking gin for the last 30 years had already suffered an attack of delirium tremens for which he was taken care of at home. His drinking placed a constant stress on his wife and six children. After a serious argument had broken out, he had come the *Hospice Guislain to be treated*, but was immediately transferred to the *Maison de Santé le Strop*, where he could be treated among people of his own social standing; he must have lost much of his sense of self esteem, wanting to be treated in the asylum among the indigent and poor. Perhaps he felt that through his addiction to gin, the cheap drink typically represented as related to working class drunkenness, he had crossed class boundaries. Or maybe he wanted to spare his family from the additional financial burden of his drinking. In the end he remained in the *Maison the Santé* for almost two years, after which he left, declared 'cured'.⁷⁰

It was at times feared that individuals could be wrongfully convicted at a request of someone wanting to get rid of a troublesome relative. In Britain such fears had led to

⁶⁹ F.S.R.M. D. 183, 23 août 1897.

⁷⁰ F.S.R.M. [E], 873, 7 avril 1898.

fierce discussions in relation to drunkenness and the law there prevented the incarceration of drunkards against their will.⁷¹ When drunkards were forcefully admitted in the Belgian asylums where this was allowed, the superintendent was responsible for the legitimacy of the claim and had to make sure no innocent men would be locked up in his lunatic asylum by wicked or profit-seeking family members.

Among the evidence in the registers, there appear to be cases where admissions for drunkenness were possibly originated by parents to curb the 'eccentricities' of unruly sons. The circumstances surrounding the admission of the son of a rich brewer's family in Tournai, for example, were dubious. He had started to drink too much wine and he was sent a few weeks to Florenville, a tourist town in the Ardennes, probably to a *maison de santé* or a hydropathic institute there. But after his restoration to health he had gradually started drinking again and now his doctor had sent him to Ghent. The patient himself explained to the medical superintendent that his parents had placed him in the asylum because they were against him marrying the girl he loved. He cried a lot, 'the patient is very sensitive', wrote the superintendent who forbade him to write a letter to his girlfriend, but allowed him to write a letter to his aunt instead. The third day, the young man had accepted his stay in the asylum and he told the superintendent that he would stay six weeks, to recover from his drinking habit and that he was happy. On the last day of his legally required 5 days observation, the asylum doctor entered the final diagnosis: 'suffers from alcoholism'. Then there was silence until one last new entry, as

⁷¹ BROWN, E. M. "What Shall We Do with the Inebriete?" Asylum treatment and the disease concept of alcoholism in the late nineteenth century.' *Journal of the Behavioral Sciences*. XXI, 1985. 54.

late as 18 years later, announcing his death.⁷² Suffering from alcoholism was in this case enough reason for such a long stay in a closed institution.

Concerns about wrongful imprisonment were more prevalent among the upper class cases because of the already mentioned indignation at being associated with the mad. Equally in the upper classes, the fears of being unjustly committed by a relative with the aim of financial gain were more real. What to think for example of the case of a man of independent means who led a life of leisure in Ostend, and who was taken by his brother to *le Strop* to cure him from his 'weird behaviour' as a result of drink. He was diagnosed with 'alcoolisme chronique et manie des persécutions'. The last part of the diagnosis probably stemmed from the patient's relentless insisting that he 'was put under judicial counsel by enemies with a grudge against him'. He maintained that he was not sick and that he wanted to be set free immediately. But, his performance was not convincing. Superintendent Vermeulen recognised in him 'a hesitant talk' and an uncertain walk and his posture 'gave away the stupor of professional drinkers.' In spite of his constant pleas, this patient was not allowed to leave and nobody ever came to visit or to reclaim him. He died in the asylum after 36 years.⁷³

British subjects who suffered from habitual drunkenness were sometimes incarcerated in Belgian asylums. London psychiatrist Dr. Lyddleton Forbes Winslow, had proposed after a visit of the Belgian asylums, that it could be an option to resort to the Belgium regulations for forceful internment of inebriates, when in Britain it would not be legally

⁷²F.S.R.M. [E], 1059, 22 nov 1904.

⁷³F.S.R.M. D. 94, 10 sept. 1891.

allowed to do so.⁷⁴ In the Ghent asylums there were only two Irishmen, with a certificate signed for by a local medical practitioner.⁷⁵ Both were priests from Waterford, where the 'Brothers of Charity' had opened a mental institution in 1883. The first arrived in October 1903, suffering from what Dr. Maere called 'the Irish national disease [*le mal national irlandais*]: dipsomania. It was not his first time in Belgium. A few years earlier he had been brought to the Carthusian monastery to recover from what he called himself 'nervous affliction'. But because of his unruly behaviour resulting from his continuous drinking exploits, the Carthusian brothers no longer wanted to take care of him and he was sent back to Ballyporeen in Waterford.

Back home, the situation went from bad to worse and the priest got into troubles with the law and he was to be sent to prison. To avoid this, his superiors had him declared insane so he could be confined as lunatic in the mental asylum instead. Once there, he was, however, immediately sent away again because after he was sobered up, the Irish asylum did not have any legal powers to keep him detained as a lunatic only because of his habitual drinking. When he succumbed to another drinking bout, he was admitted again, but this time escaped. After being found dead-drunk on the street, the bishop, realised that the priest's situation in Ireland was desperate. Shipping him over to Belgium once more would be the only possible way to save him from prison and possibly more importantly, to have him out of sight, as his behaviour seriously damaged his own and the Church's reputation. This time the priest was legally committed in the *Maison de Santé le Strop* as a lunatic, with a medical certificate from an Irish doctor.

⁷⁴ WINSLOW, F. L. *On uncontrollable drunkenness considered as a form of mental disorder, with the only possible means of legally dealing with such cases*. London. 1892. & *British Medical Journal*, Nov 14, 1891. 1881. & May 14. 1892. 1063. & Sept 14, 1895. 693.

⁷⁵ STOCKMAN, R. 'The Brothers of Charity.' in STOCKMAN, R. ed. *Neither rhyme nor reason: history of psychiatry*. Ghent. 1996. 157.

After a stay of four years in the asylum he recovered from his habitual drunkenness and would be free to go back home. This turned out to be, however, problematic, as the priest explained to one of the nurses, Brother Herculin. If declared sane, he would probably have to go to prison, because of former charges of child abuse. The grave charge, which was until then never detailed because it probably had to be hushed up, was now for the first time spelled out, by the patient himself. And thus the Irish priest stayed in the *Maison de Santé le Strop*, where he suffered from serious *mélancholie* until his death in 1909.⁷⁶

Those who had committed a crime under the influence of drunkenness could indeed consider the asylum as a 'safe' place to avoid the courts. Once declared insane, one could not be held accountable for his acts. When an 18 year old sailor, who had stolen money and had got drunk on it after running away from home was brought to the asylum by the police. But he was dismissed even before the 5 days of observation were over: after intervention of the magistrate he was sent back straight away to the *gendarmérie* to face up to his crime.⁷⁷

Three years after the Irish priest with the concealed criminal past had died, the bishop from Waterford sent another, equally badly behaved priest under his care to Ghent. He had caused a 'public scandal' having drunk too much whiskey. This foreigner, detained in Belgium against his will, used his 'power of performance' in a reverse line of attack. Before arriving in *le Strop*, he had been brought as well to the Carthusian monastery in Ghent, but his drinking had become even worse and therefore the Bishop of Waterford insisted for his incarceration in *le Strop*. Once arrived there, drink was rationed, but the

⁷⁶ F.S.R.M.[E] 1020, 23 oct. 1903

⁷⁷ F.G.R.M. 15, 4845, 12 nov. 1881.

priest could not stay away from it. In letters to his bishop he continuously begged to be allowed to go back to the Carthusian monks, probably because there he was allowed to drink. Instead of behaving well, so that he would 'deserve' his freedom, the Irish priest in the *Maison the Santé* badly misbehaved and acted inappropriately [*commis bêtises*]. Dr. De Moor was seriously shocked by his behaviour: 'he does not show any regret, not one firm resolution and what is the worst, he says that his bishop is an eccentric'. The doctor concluded, confirming the persuasive character of this patient: 'he has very independent ways for a priest.' The priest clearly did not comply with the rules and regulations in the asylum and his campaign of continuing misbehaviour proved successful, because four months later he was transferred again to the Carthusian monks.⁷⁸

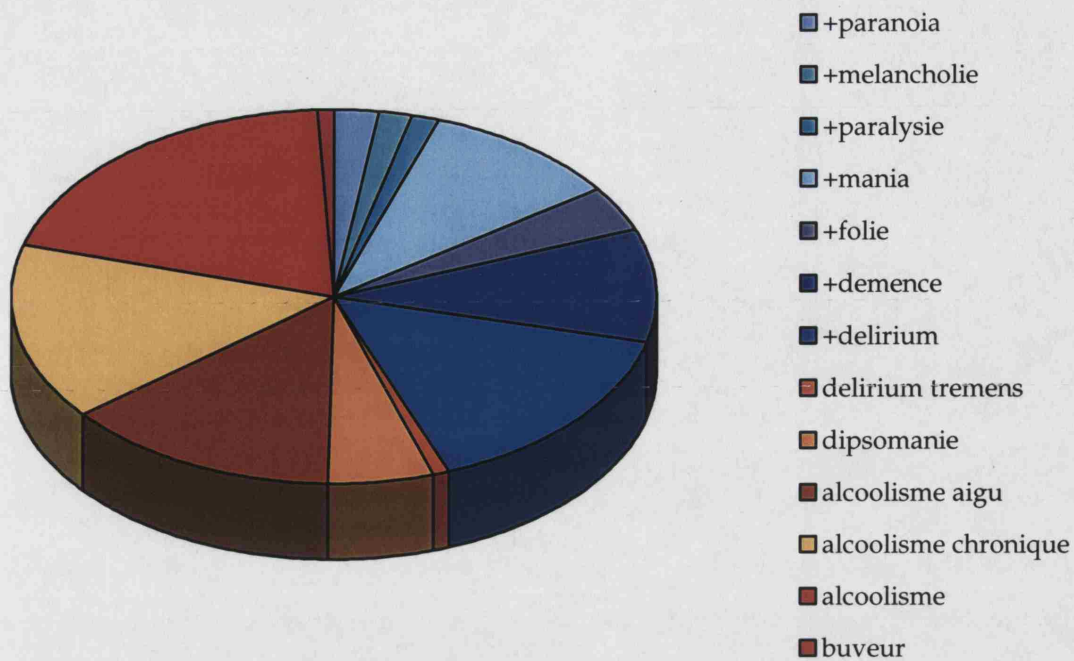
Plenty of examples show that the reasons for incarceration were various and sometimes controversial. Often the asylum was the refuge for those who could not control themselves and were considered to pose a danger to themselves, their families or their environment. The trespassing of the rules laid out by propriety was often a reason why wealthy families would send their alcoholic members for treatment. Some alcoholics presented themselves voluntarily at the gates of the asylum, because they needed help to overcome addiction. Forced confinements, on the other hand, led to contention of the decision and wrongful committal was always a possibility. The conditions for institutionalisation and incarceration of drunkenness were constantly renegotiated by the different players: the patient's family, the doctor who had to provide the medical certificate, sometimes the local and judicial authorities and the asylum doctor.

⁷⁸ F.S.R.M. [B] 1271, 18 March 1914.

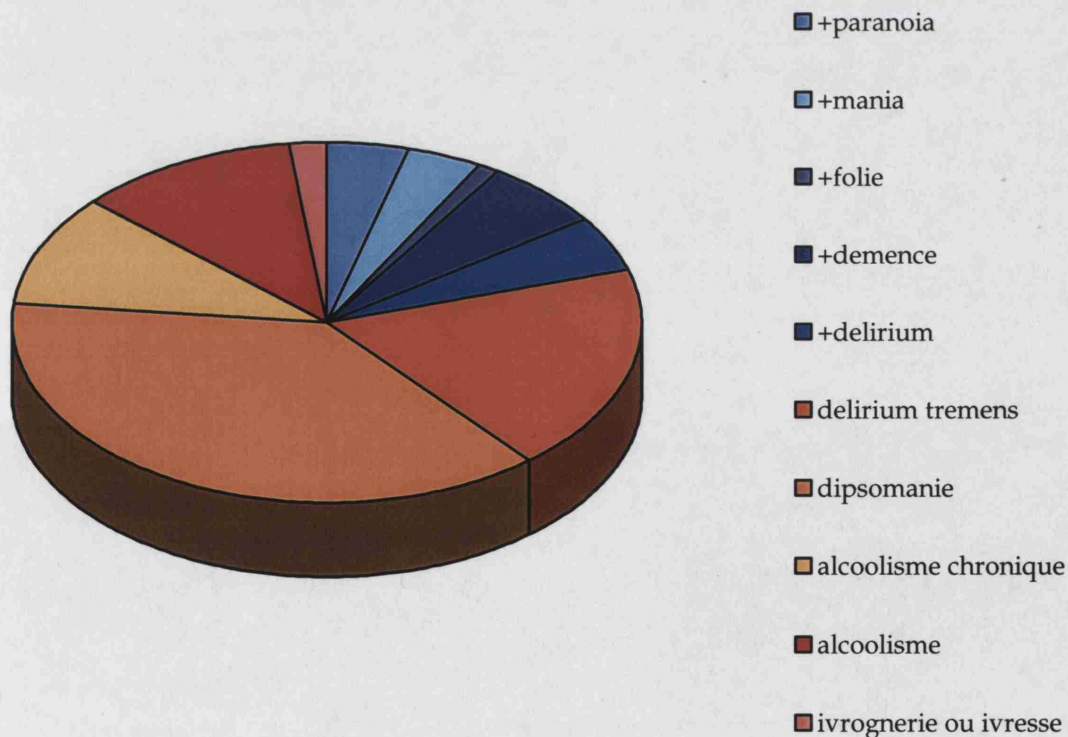
ii. Diagnoses

The outcome of those negotiations was never stable and at all times inconsistent and the way in which drunkenness was interpreted varied from case to case. The following figures give an idea of how the 'alcoholism' was diagnosed in the two asylums. The blue colours indicates diagnoses whereby alcoholism was accompanied with another mental imbalance, and the different shades of blue refer to the different mental afflictions with which a diagnosis of drunkenness was accompanied in both asylums. The yellow and red shades of colour refer to diagnoses of merely alcoholism, referred to in diverse terminology. It is clear at once that in the upper class asylum, simple alcoholism, without further complications, was much more prevalent.⁷⁹

⁷⁹ Graph. 5. *Hospice Guislain*: diagnoses of 'alcoholism'. p.215. & Graph. 6. *Maison de Santé le Strop*: diagnoses of 'alcoholism'. p. 215.



20. Graph 5: *Hospice Guislain*: diagnoses of 'alcoholism'.



21. Graph 6: *Maison de Santé le Strop*: diagnoses of alcoholism

After the family or the town authorities had decided that a certain person who drank excessively could be a danger to the public order, the advice of a specialist was needed by law to confirm this. The very first person that had to decide that the drunkenness of a particular person was of a form which required incarceration in an asylum, was a medical professional, often the family doctor who was asked to write the certificate required for admission. Some drunkards who were diagnosed in the mental hospital as suffering from *alcoolisme chronique* or *delire alcoolique*, for example, had arrived with a medical certificate stating exactly this. But sometimes the medical certificate also presented a different diagnosis, as in the case of a lorry driver, who was diagnosed by his doctor with a mental disease: the medical certificate with which he arrived in the hospital read: 'acute mania with furious delirium'. But once inside the hospital, the cause of the delirium was identified differently by the superintendent who decided that this patient really suffered from *alcoolisme*.⁸⁰

Many working class people admitted to the *Hospice Guislain* after being drunk in public, assessed their problem themselves as different from mental illness. When a pensioned army lieutenant was arrested for public drunkenness and brought to the asylum, he complained loudly about the idea that the police thought him a lunatic. He wrote a letter to the magistrate to complain about his incarceration, and two weeks later he was sent home as *non-aliéné*: it was decided that he was not mad, but just drunk.⁸¹ Similarly, a worker from Antwerp had travelled to Ghent to visit his family. After what had probably been a pleasant family reunion he was arrested in the street for drunkenness and brought to the city jail. The next morning, however, he had not completely sobered

⁸⁰ F.G.R.M. 18, 5733, 6 juin 1893.

⁸¹ F.G.R.M. 15, 4674, 5 août 1879.

up and was consequently brought to the asylum. Slowly regaining his consciousness, he admitted that he had drunk too much and the doctor realised there were no signs of chronic alcoholism or delirium.⁸² It was hence concluded that also this patient was not mad, but had just been drunk and he was sent home, straight away, declared not mad. Nevertheless, many other people in the same kind of circumstances, who were allowed to leave when calm and sober again were still diagnosed as *alcoolique*, often in the *aigu* version, like a dockworker, for example, who had celebrated too extensively for the occasion of New Year.⁸³

In some instances the superintendent has crossed out an initial first diagnosis of *alcoolisme*, received by registration in the asylum and changed it into *non-aliéné*.⁸⁴ It is for the most part uncertain what the criteria were to distinguish between those cases who were identified as suffering from *alcoolisme* and those who came in with the same symptoms, in the same inebriated state, but who were dismissed as 'not mad'. Twenty patients were diagnosed with *alcoolisme aigu*, a diagnosis uniquely reserved for the public lower class asylum, and another 22 were dismissed as *non-aliéné*: not mad, just drunk. However, from the assessment of the symptoms it remains at all times unclear what constituted the difference between the different outcomes of the consultation. Patricia Prestwich argued in her article on the alcoholic population of the Parisian asylums, that there was a desire among the French psychiatrists to narrow the definition of alcoholism in order to restrict their clientele. Aggravated with their working conditions in the overfull hospitals, the doctors wanted to rid themselves from

⁸² F.G.R.M. 21, 6435, 5 mars, 1901.

⁸³ F.G.R.M. 21, 6425, 3 jan. 1901.

⁸⁴ F.G.R.M.18, 5829, 26 sept. 1894.

'inappropriate' patients.⁸⁵ The recorded cases in the Ghent registers remained at all times very ambivalent, but what can be concluded with certainty is that the way patients were evaluated clearly depended on more than just on their pathological symptoms. How the difference between drunk and mad and the meaning of excessive drinking was exactly established, was determined by several factors. The appreciation of drunkenness was influenced by the patient's social background, by the story told by his family who brought him in, but mostly by himself.

Patients who were better at what Erving Goffman has called 'mystification' of their problems, were evaluated more positively, assessed more readily as 'normal' and therefore sent home faster. Hiding deviant behaviour, while instead presenting more prominently conduct that was socially approved, could influence the judgement of the environment and specifically of the medical superintendent who had to pronounce a verdict.

During this process, the idea of normative, i.e. sober, and in fact idealised identity became legitimised, together with the framework to which the role belonged, in this case the values and norms of the medical director and the brothers in the institution.⁸⁶

This difference of assessment based on the patient's behaviour can be illustrated by comparing the stories of two people who were both admitted in the *Hospice Guislain* in a state of drunkenness, but who, through their different social background and performance received a different diagnosis and treatment.

⁸⁵ PRESTWICH, 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' 115-131.

⁸⁶ GOFFMAN, *The presentation of self in everyday life*. 67. & GOFFMAN, *Stigma: notes on the management of spoiled identity*. 44.

A farmer was declared mentally ill after five days of observations in the asylum. Dr. Ingels had decided upon this diagnosis after he was informed that the farmer had been a violent inveterate drinker for twenty years and because his family had asked for him to be kept under confinement. Once 'afflicted with mental disease (alcoholic mania)', as it read on his form, the farmer could be legally kept for an undefined period in the asylum.⁸⁷ The family of an equally aggressive shopkeeper, also firmly endorsed his forced detention: it was that same shopkeeper whose wife had had so many difficulties to have him admitted. But Dr. Morel registered him simply with *alcoolisme*, a diagnosis which did not necessarily imply a longer legal stay.

While the uneducated and illiterate farmer had 'begged' in vain with the superintendent to go home to provide for wife and seven children, the shopkeeper, one step up on the social ladder, had used another clearly more successful technique to persuade the medical staff of his sanity. Unreasonable and aggressive at home, once in the hospital, he acted completely differently. 'He behaves well', wrote the superintendent pleased, 'he writes almost without stopping letters to his wife and his aunt to ask them forgiveness for his former conduct.'⁸⁸ The farmer from the other hand did not want to admit his immoral behaviour. He had cried and wept and denied he had ever mistreated his family.⁸⁹

Consequently, while the farmer was diagnosed with mental illness, officially outlined in his registration form under the terms of the Ministerial Circular, because of his violence

⁸⁷ F.G.R.M. 15, 4840, 21 oct. 1881.

⁸⁸ F.G.R.M. 18, 5714, 10 avril 1893.

⁸⁹ F.G.R.M. 15, 4840, 21 oct. 1881.

resulting from drinking, the same problem was positively evaluated as 'curable' with the repentant shopkeeper.

Because the response of the farmer had represented irrationality and passion, or 'unmanly' conduct, he could be easily diagnosed as mad. The shopkeeper, in contrast, had showed intelligence and sensibility and – very importantly in a deeply Catholic environment – remorse, and he was therefore rewarded with a positive verdict.

If there were doubts about a patient's statement, and it was hard to convince the medical superintendent of his sanity during the interview, the public performance of the patient prior to his arrest could confirm but also refute an impression. When a well-educated wealthy widower from Deynze was brought to the asylum in a delirious state, he reacted furiously when he was told he was to be kept in the hospital because he abused alcohol. But although his social background would be supportive of his claim, evidently, his mental and physical state were anything but convincing. To make matters worse, in town he was known for 'going from bar to bar' and his drinking had thus been entirely public. It was very difficult, if not impossible to keep up his story that he never drank excessively. After more interrogations by the medical staff, he did admit to abusing alcohol. He confessed to drinking 5, 6 or 7 *gouttes* (shots of gin) in the morning and 7, 8 or 9 pints of beer in the afternoon and evening, according to the circumstances. Still he was not diagnosed with a form of alcoholism, but with *delire*, a less problematic and straightforward diagnosis of mental aberration.⁹⁰

The medical superintendent was not solely responsible for the decision whether a patient was mad or drunk. When it was established that someone suffered from

⁹⁰ F.S.R.M. G. 64, 23 août 1879.

drunkenness in such a degree that allowed for incarceration in a lunatic asylum, it was the same superintendent who had to decide what type of drunkenness the patient was ill with. In the language, which is used to describe the condition of the drunkards in the asylum, like elsewhere, expressions of biology and science are used interchangeably with references to social environment and morality. The examples in Ghent show how the ambiguous language of drunkenness became an essential mechanism towards the making of medical power. In general, the language used to describe the disease 'dipsomania', 'alcoholism' or 'delirium tremens' was at all times endowed with normative assumptions and preconceptions.

It is immediately apparent from the evidence of both asylums in Ghent that diagnoses were dependent on more than the amount of alcohol the patient had consumed, as patients with a different social background were diagnosed with different problems. Hence the drunkards of the *Hospice Guislain* suffered from other ailments than those in the upper class *le Strop*, even though they presented the same physical symptoms. The above graphs show that *alcoolisme aigu*, or 'acute alcoholism' for example, was a very common diagnosis in the public asylum. This diagnose indicated a passing form of drunkenness; a fit that would be over rapidly after which health would be restored. In the upper class *Maison de Santé*, however, not one case of 'acute alcoholism' was recorded.

Similarly, although more than one in ten of the patients in the *Hospice Guislain* were diagnosed with drunkenness related to 'delirium' as in for example, *delire alcoolique*, only two patients were diagnosed with the 'official', psychiatric term for drunken delirium: 'delirium tremens', moulded by Valentin Magnan in the second half of the nineteenth

century into a specific medical condition, a separate, and identifiable mental affliction.⁹¹ While this condition was rare in the public *Hospice Guislain*, it became the diagnosis of choice for almost 1 in 5 patients who entered the private *Maison de Santé le Strop* with an alcohol-related problem.⁹²

But the most evident class-related diagnosis, whereby drunkenness became classified as a disease, was that of *dipsomanie*. As mentioned earlier, Joseph Guislain explained 'dipsomania' in his *Phrénopathies* as a form of 'monomania' and in the early versions of the patient registers of the *Maison des hommes aliénés* Guislain himself as superintendent diagnosed 4 patients from as early as 1850 onwards with *dypsomanie* and *dipsomanie*. Patricia Prestwich noted how the French psychiatrists did not frequently find 'dipsomaniacs', among those admitted to the asylum for excessive drinking in the Paris public asylums. At St. Anne in a sample of over 1200 cases she only counted 22 cases diagnosed with *dipsomanie*, and most of them were women.⁹³ Edward Brown has argued that in America most superintendents were unwilling to use the concept of dipsomania to extend their authority.⁹⁴ Also in the Ghent *public* asylum it was a rare diagnosis: after Guislain's death in 1860 until 1914 only 2 further patients in the *Hospice Guislain* were called 'dipsomaniacs'. However, in the *Maison de Santé le Strop*, where the rich patients

⁹¹ MAGNAN, V. *De l'alcoolisme, des diverses formes du délire alcoolique et de leur traitement*. 1874. Magnan devoted almost 150 pages from a text of 254 pages in influential 1874 work on alcoholism to 'delirium tremens' MADDEN, 'Substance use disorders. Clinical section.' 660.

⁹² see Graph. 5. *Hospice Guislain* diagnoses of alcoholism & Graph. 6. *Maison de Santé le Strop* diagnoses of alcoholism p. 215.

⁹³ PRESTWICH, 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' 127. Although Magnan himself was superintendent, at St. Anne in a sample of over 1200 cases she only counted 22 cases diagnosed with *dipsomanie*, and most of them where women.

⁹⁴ BROWN, 'What Shall We Do with the Inebriete?' Asylum treatment and the disease concept of alcoholism in the late nineteenth century.' 48-59.

were taken care of, 'dipsomania' was the most common diagnoses among alcohol-related problems. Forty per cent of those who were in the *Maison de Santé* because of trouble with alcohol were diagnosed as such.⁹⁵ In practice the specific diagnosis of dipsomania was in the asylums in Ghent reserved for patients for whom habits of alcohol abuse were much more socially unacceptable: drunkards from the upper classes.

The argument that dipsomania was a diagnosis applied to those for whom excessive drinking was not 'normal' behaviour can also explain why in Prestwich's research in the public asylum the majority of the cases with *dipsomanie* were women. For women, even from the working classes, drinking was always a graver social transgression than it was for men. For the state of affairs in Ghent, a comparison of the diagnoses based on gender is impossible, since both institutions in this study were exclusively for male patients. But, instead, thanks to the access to the details of the exclusively wealthy patients in the private *Maison de Santé le Strop* together with those of the public asylum *Hospice Guislain*, the situation can be assessed with social class in mind.⁹⁶ In Ghent, 'dipsomania' was a diagnosis of the upper classes, which was constructed to refer to those who were not expected to display drunken behaviour. From the moment it had to be acknowledged that excessive drinking was not uniquely the predicament of the working classes, but that also women and upper classes abused drink, a new, medical term needed to be created to replace *alcoolisme* and *ivrognerie* which was tainted with meanings that related it closely to the unsavoury habits of the lower classes in society. The diagnosis 'dipsomania', formulated already in the mid- nineteenth century, with moral

⁹⁵ see Graph. 6. *Maison de Santé le Strop* diagnoses of alcoholism. p. 215.

⁹⁶ In the Parisian asylums, there were some wealthier 'voluntary' patients as well, but the majority of patients were poor or middle class. PRESTWICH, 'Family strategies and medical power: 'Voluntary' committal in a Parisian asylum, 1876-1914.' 804. The *Maison de Santé le Strop*, in Ghent, from the other hand, was a private institution that exclusively catered for the upper classes.

undertones, re-emerged in the patient registers from the 1880s onward with a new meaning which served a newly found need: the classification of those of the upper classes who had given in to drink.

The social implications within a medical theory became ever more evident when considering how the asylum doctors in Ghent interpreted the theory and daily applied it in practice. Confronted with drunkards from specific social backgrounds it was felt to be more 'acceptable' and 'normal' for a farmer or worker to show an inclination for drinking, while it was socially much more problematic – deviant, and thus 'pathological' – for, for example, a proprietor, a pensioned priest or a medical student.⁹⁷

But these processes were at all times complex and ambiguous and generalisations are always inadequate. Whereas there were very few 'dipsomaniacs' recorded in the *Hospice Guislain*, there were still many suffering from *alcoolisme chronique* in the *Maison de Santé le Strop*. There does not seem to be one clear-cut argument why those are then not diagnosed with *dipsomanie*, since those cases often present precisely the same symptoms, and sometimes also involve heredity. The examples of patients who were initially recorded as suffering from *alcoolisme* and after having relapsed, were called 'dipsomaniacs' on a subsequent admission, seem to indicate that 'dipsomania' was reserved for those with an uncontrollable urge for the bottle, but in general in the *Maison de Santé le Strop* the two diagnoses were used interchangeably.

Nevertheless, the idea of social and ideological meanings being imbedded within a specific case and subsequent diagnosis can account for the two remaining exceptional diagnoses of *dipsomanie* seemingly out of character in the *Hospice Guislain*, dating from

⁹⁷ F.S.R.M. D 10, 7 juillet 1884. & E 983, 24 nov. 1902. & D 148, 27 septembre, 1885.

1890 and 1900. At first sight it remains unclear why those specific patients were diagnosed with such an unusual diagnosis in the public asylum. One of them was an addict to both alcohol and chloral the only drugs addict in the entire sample. This patient, although 'without profession' was not a poor man; as *pensionnaire* he paid for his own upkeep in the asylum. He had started drinking about 20 years ago, when he was forty and had since been in and out of treatment. He had been in Paris, at the *St-Anne*, and in various other mental and ordinary hospitals. Drunk when he was brought in front of the asylum doctor in Ghent, he admitted to abusing considerable amounts of strong liquor and choral. He told them that he fought this impulse to drink as much as he could, but that he always again succumbed to what the psychiatrist called '*sa triste passion*'. The prescribed therapy involved the eating of meat two times a day and a complete suppression off all kinds of alcoholic drinks. The patient was subsequently allowed to leave 'cured' two months after he had come into the asylum.⁹⁸ He had been wealthy enough to have to pay for his own upkeep, to afford meat twice a day and to be diagnosed as 'dispomaniac'.

Although his social position and his wealth could perhaps account for the specific diagnosis in this case, the last remaining diagnosis of dipsomania in the *Hospice Guislain*, the case of a 57 year old tailor still remains unexplained. His case seemed a fairly 'typical' instance of a working class alcoholic patient of the *Guislain* asylum and there is further little indication why this particular patient, who had already endured several convictions for drunkenness and disturbance, would receive such an 'exclusive' diagnosis. At first sight, in his case notes, there does not seem to be anything particular

⁹⁸ F.G.R.M. 16, 5470, 6 aout 1890.

which could justify this peculiar diagnosis of *dipsomanie et dégénérescence mentale* of an 'ordinary' case of drunkenness, as so many presented itself in the asylum.

There is, however, one likely explanation. Like the chloral addict, the only other 'dipsomaniac' in the *Hospice Guislain* after 1860, the tailor had also been in a Paris asylum before coming to Ghent. Both patients had certainly passed from the Admissions Office in Paris, where they had been diagnosed by the master and myth Valentin Magnan himself.⁹⁹ In Ghent, the authority of Magnan was absolutely endorsed and both Dr. Morel in 1890 and De Moor 10 years later bestowed upon those patients who had been treated by Magnan and so were directly touched by the might of French ruling psychiatry, a Parisian text-book diagnosis.¹⁰⁰

Whereas 'alcoholism' was a harsh diagnosis, immediately associated with the morally inferior and weak-willed working classes, *dipsomanie* resonated as more acceptable a term in the assessment of a drinking problem among the wealthier classes, for whom the aspect of decency and propriety played a much more important role. The case of a 17-year-old student from a very wealthy family who seriously 'misbehaved' illustrates this. The doctors decided that he was 'vicious', prone to 'debauchery' and 'masturbation' and although he looked perfectly sane when sober, he gave himself too often over to drink. His father had been a drinker as well and the son was now confined as *dipsomane*. His mother had decided that he should be taken to the *Maison de Santé* after he had menaced his parents and stolen the wallet of a servant. Once at *le Strop*, he was difficult and he bullied his guardians when he was not immediately given what he wanted. But,

⁹⁹ DOWBIGGIN, 'Back to the Future: Valentin Magnan, French psychiatry and the classification of mental diseases 1885-1925.' 386

¹⁰⁰ F.G.R.M. 21, 6412, 12 oct. 1900.

concluded the superintendent, it was not his fault, 'these are real irresistible impulses [...] these sick are the most dangerous men to society.'¹⁰¹

With the concept of 'dipsomania', upper class heavy drinking was represented as a disease, different from lower class alcoholism. Imbedded in one's particular biological constitution it became a condition that implied that the sufferer was no longer responsible. Unlike the drunkard, for whom drinking was a habit and who therefore was supposed to have a degree of control over his behaviour, the dipsomaniac fought fervently, but unsuccessfully against the impulses.¹⁰² But even so, the language of morality always permeated the scientific diagnosis. According to Magnan's theory another distinctive feature of a dipsomaniac was that after having given in to the uncontrollable impulses he or she usually felt guilty.¹⁰³ It was this Catholic idea of guilt that was addressed in the asylum when treating the patients: they were approached with *moralisations* to convince them that drinking as they did was in fact inappropriate behaviour for people of their social class. In spite of a growing use of medical terminology to point problematic drinking out and a increasing acceptance for organically causes for madness, in Ghent, as late as 1887, drunkards were still treated in the asylums with *moralisations*.¹⁰⁴ Sentiments of guilt and regret were continuously promoted and those of modesty and subservience endorsed.

¹⁰¹ F.S.R.M. G 29, 17 fév. 1877.

¹⁰² VALVERDE, *Diseases of the will: alcohol and the dilemmas of freedom*. 39.

¹⁰³ MAGNAN, V. *Leçons cliniques sur la dipsomanie faites à l'asile Sainte-Anne*. Paris. 1884. in *Le Scalpel*. 23 mars, 1884. 250.

¹⁰⁴ F.S.R.M. D 51, 7 Septembre 1887.

A typical patient of the upper classes was a wine merchant in his forties, diagnosed with dipsomania.¹⁰⁵ He was received in *le Strop* no fewer than 5 times between 1883 and 1892. He behaved very offensively towards the medical superintendent and claimed that he was not ill, 'neither physically or mentally'. He argued that his incarceration as a lunatic was an act of vengeance by the doctor who had provided the medical certificate in order to ruin his *réputation devant le monde*.¹⁰⁶ The wine merchant was then released, but had to be readmitted very soon. Time after time he ran into troubles with the authorities in his town because of his drunken and improper conduct. When he ended up once more in the asylum, he complained that it was not he, but his family: his brother, a priest and his sister, who were mentally ill. He started to write to the magistrate for his release, but the medical superintendent contradicted his requests in his own report, which he based on the evidence of the patient's parents and the mayor and the police officer from his town. '[He] is a man who cannot behave himself appropriately in polite society any longer. He drinks, spends all his money and drives himself into ruin.'¹⁰⁷ When the medical superintendent saw the wine merchant arriving for a fourth time, he became much more fatalistic and was now convinced he had made the right diagnosis: 'Here he is calm, like during he previous stays, but I am of the conviction that, when released, he would give himself over again to all kinds of eccentricities'¹⁰⁸.

¹⁰⁵ Jacqueline Lalouette showed that the alcoholics locked up in French asylums had often professions related to the wine industry. LALOUETTE, 'Alcoolisme et classe ouvrière en France aux alentours de 1900.' 89-107. As this case shows, in Belgium this happened as well, but in a country where beer was the national drink, many more alcoholics in the asylums in Ghent were active in the brewery industry or were café-workers.

¹⁰⁶ F.S.R.M. G 120, 1 août 1883.

¹⁰⁷ F.S.R.M. D 26, 11 juillet 1885.

¹⁰⁸ F.S.R.M. D 55, 10 mars 1888.

As illustrated already in more than one example, it was exactly those 'eccentricities' of drunkards that led them to the asylum. The boundaries of tolerance that had to be crossed before help in the asylum was required were set out differently for different groups in society.¹⁰⁹ This tolerance was much more restricted for the upper classes. Among the lower classes drinking could still be seen as 'normal', it formed part of their culture or even 'interested' behaviour, because it helped them to forget their misery.¹¹⁰ For upper class drunkards this was not so. They could only lose their respectability and that of their families, and drinking for them was social madness, interpreted as physical insanity. In this light the effort to transform drinking upper class men into diseased patients in the last quarter of the nineteenth century, seemed appropriate and this can explain the larger number of 'alcoholics' kept for treatment in the upper class asylum.

iii. 'Passion in Baccho et Venere': *paralysie générale* and drink

In 1878, a 50 year-old Irishman, who had been captain on a ship of the Royal Navy, was received in the *Maison de Santé le Strop*. The symptoms of 'general paralysis' had revealed themselves for the first time a year and a half earlier, during a trip in the Pacific. Dr. Ingles believed that the captain's problems had originated after he had started to abuse rum and whisky. The medical superintendent's reasoning and diagnosis adhered to contemporary medical theories that general paralysis was caused by prolonged abuse of alcohol.

In both asylums, when mental disease and alcoholism met, they were very often accompanied by syphilis. The ambiguity between biology and morality, disease and free

¹⁰⁹ PRESTWICH, 'Female alcoholism in Paris, 1870-1920. The response of psychiatrists and families.' 12.

¹¹⁰ FOUCAULT, BAUDOT & COUCHMAN, 'About the concept of the 'dangerous individual' in 19th-century legal psychiatry.' 5.

will, in dealing with drunkenness in the asylum, was never more clear than in cases of those suffering from *paralysie générale* and syphilis. Almost one in five of the cases of mental disease whereby alcohol was identified to be responsible for the occurrence of the disease, were cases of *démence paralytique*, *folie paralytique* or *paralysie alcoolique* etc.: general paralysis most likely connected to the last phase of congenital syphilis. In all of these cases, however, chronic alcoholism, rather than syphilis, was thought to be the origin of the disease. In general, 'alcoholic excess' was always considered the first cause of general paralysis. When there was no information on the drinking habits of the paralytic patients, as for example in the case of a day labourer suffering from paralytic dementia in the *Hospice Guislain*, the superintendent filled in 'probably', where the register asked if the patient abused alcoholic drinks, thus in effect forging a presumed cause derived from the nature of the disease.¹¹¹

Mosly, drunkenness as cause for paralysis was accompanied by other excesses, particularly sexual. 'Alcohol and women' were then the 'substances' that were overindulged in leading to disease and in one case the disease itself was called 'passion in Baccho et in Venere'.¹¹² Paralysis was regularly represented in the registers as virtually a punishment for an excessive lifestyle in general. In the case of a lawyer, his problems were caused by 'overwork, alcohol, unbalanced life, alcoholic and venereal excesses'. The superintendent added, admonishingly, how in the lawyer's household 'bottles of champagne were washed down and money was thrown through windows and doors.'¹¹³

¹¹¹ F.G.R.M. 15, 4815 juin 1881.

¹¹² F.G.R.M. 18, 5682, 3 déc. 1892.

¹¹³ F.S.R.M. [F] 1106, 9 jan. 1907.

The confusion that led to heated debates in the medical community towards the end of the century about the causes of general paralysis – the question if excess and more specifically chronic alcoholism was enough to account for the condition – is reflected in the registers. Diagnoses of general paralysis resulting from alcoholism became in the last decade of the century occasionally accompanied with a subtle 'S' in the registers, sometimes alongside a question mark, and syphilis became identified as a cause for *paralysie générale* and in the pre-printed registers, it acquired with alcoholism a place under 'harmful influences'.

In the association of venereal excess and drinking excess as causes for terrible diseases such as general paralysis, the disease was explained in moral terms: the symptoms and the suffering were interpreted very nearly as a punishment of undesirable social behaviour. The study of the representation of syphilis and *paralysie générale* and its perceived and consequently contested connection with excessive drinking in the patient registers deserves much more elaborate study. For now, within the analysis of the social construction of medical representations of alcoholism, it provides a good example of the prevalence of preconceived ideas on decency and appropriate behaviour within the diagnoses of drunkenness.

iv. Heredity and degeneration

The relationship between heredity, alcoholism and madness was taken for granted by the medical staff in the Ghent hospitals. Heredity was so important that it was often mentioned with *excess alcoolique* as the 'presumed predominant cause of the affection' and the many references to the familial situation of the newly recorded entries illustrate this too. Almost 50 people who came to the *Guislain* asylum because of alcohol-related trouble answered positive to the standard question if there was any madness, alcoholism

or 'unusual behaviour' in the family. Most, about 30 of them, referred to their father as alcoholic or drunk. Only in two cases was the drunkenness of the mother was mentioned who had been *aliénée*, *hystérique* and *'nerveuse*.

In the *Maison de Santé le Strop* only about 20 patients talked about the medical background of their family. What is striking is that in the upper class registers the parents were less often mentioned as bearers of hereditary taints, but instead more attention is given to the wider family: uncles, aunts, brothers and sisters were more often brought up than parents. In contrast to what can be read in the registers of the *Hospice Guislain*, in only 4 cases was it revealed that the father was abusing alcohol and there was only one mention of maternal negative influence: a mother who used to be 'nervous'. In general, instead of exactly defining who suffered what, as in the lower class asylum notes, the observations of the richer patients were much more broad and vague. Patients would not easily give away specific cases of alcoholism or madness in their immediate family because of fears of loss of the reputation of the family. Doctors in their turn would be also more inclined to protect the 'privacy' of the family history in the registers, which were after all official judicial documents.

But although heredity was very important in the diagnosis, more often social problems, rather than heredity, were accredited to be the cause of the patients' problems with alcohol. The medical superintendents devoted much attention to and showed sympathy for the 'non-biological' origins of alcoholism and madness, which were mostly referred to by the patients themselves as the beginning of their struggle with drink. Love problems were often named as a cause of extended alcohol abuse and financial trouble was another incident that could lead to excessive drinking. A pensioned priest and teacher for example, had come voluntarily to the *Maison de Santé le Strop* after he was completely ruined and had started to drink a lot, however, he stated – defending his

respectability – he had never been drunk in public.¹¹⁴ Another patient blamed his drinking problem on his wife, who he said had been unfaithful and had incurred large debts; after selling all their properties, he had only 50 fr. left.¹¹⁵ Frequently, however, cause and effect were turned upside down. Thus, stories of social deprivation and poverty became identified as cases of inherited drunkenness, especially when they could be explained in terms of moral failure. In other words, environmental causes were accounted for in biological language. So it was for example under the heading 'heredity' that the doctor felt he needed to mention that an alcoholic patient was the son of *une prostituée clandestine*.¹¹⁶

When the printed registers changed in the beginning of the 1890's more questions on heredity were added and degeneration became much more prominent. But although from the layout of the registers and from the medical theoretical writings in general it seemed that *dégénérescence* was increasingly important and present almost everywhere, in the Ghent asylums it was on the whole a rare diagnosis. Dr. De Moor's enthusiastic first diagnosis of degeneration, of a weaver admitted to the *Hospice Guislain* for epilepsy in 1895, echoed the interest of the Belgian medical establishment in these ideas. In his case notes Dr. De Moor wrote, as if he had discovered a new species: 'Alcoholic excess, son of a drunken father. It is very probable that we find ourselves before a congenital degenerate'.¹¹⁷ But after this first degenerate in 1895, only 9 other patients in the public asylum were pinpointed with some *tares, signes, marques* or *stigmates* of degeneration. The treating physician was in all cases Dr. De Moor. Prestwich came to the same

¹¹⁴ F.G.R.M. [E] 983, 24 jan 1902.

¹¹⁵ F.G.R.M. 16, 5305, 7 juillet 1888.

¹¹⁶ F.G.R.M. 27, 7226, 16 nov. 1880.

¹¹⁷ F.G.R.M. 18, 5863, 18 Mars 1895.

conclusion for the Paris asylum. 'Although alcoholism was considered to be both a symptom and a cause of hereditary degeneracy', she wrote, 'in only 43 cases of over 1200 in this study were alcoholic patients labelled as 'degenerate'.¹¹⁸

As was the case with drunkenness and mental disease more generally, it was often not clear why the medical superintendent diagnosed one patient as degenerate and the other not. It has been alleged that *dégénérescence* was a working class condition or was generally assigned to the working masses.¹¹⁹ In Ghent the doctors identified cases of degeneration in both asylums and unexpectedly there were relatively many more patients diagnosed as degenerate among the wealthy in *le Strop* than among the much larger, poor population of the public *Guislain* asylum. In *Maison de Santé le Strop*, 13 patients were diagnosed with one or another form of *dégénérescence* (1.15%), all between by Dr. Maere between 1899 and 1911, while, in the *Hospice Guislain*, as mentioned, there were only 10 degenerates among the alcoholic patients in the sample (0.5%).

Although it is very difficult to generalise about the use of the new term *dégénérescence* in the diagnosis, the doctor's conclusion unquestionably entailed a strong moral judgement. 'Degeneration' was used in Ghent by the doctors, when drinking was combined with other unacceptable social and moral behaviour.

¹¹⁸ PRESTWICH, 'Drinkers, drunkards and degenerates: The alcoholic population of a Parisian asylum, 1867-1914.' 127.

¹¹⁹ e.g. NYE, 'Degeneration and the medical model of cultural crisis in the French Belle Époque.' 19-41. & PICK, *Faces of degeneration: a European disorder, c. 1848 - c.1918*. & HARRIS, *Murders and madness: medicine, law and society in the Fin de Siècle*. 255. and in England PORTER, 'Enemies of the race': biologism, environmentalism, and public health in Edwardian England.' 147-178. & SOLOWAY, 'Counting the degenerates: the statistics of race deterioration in Edwardian England.' 137-164.

Sexual promiscuity was more than once implicated in a diagnoses of degeneration.¹²⁰ Indulging in drink and combining it with sexually promiscuous acts, was central to the degeneration paradigm. It showed that 'alcoholic taint has left its traces'.¹²¹ What was cause and what result was unclear but it meant directly jeopardising the next generations and eventually the entire race. The clearest example of a moral judgement of a patient who became diagnosed as a degenerate is the case of one of the two Irish priests, who at arrival was diagnosed simply with *dipsomanie*. When it emerged, however, that he had been involved with sexual acts with young boys, his diagnosis was then changed and the priest became now a *dégénéré moral* suffering from *alcoolisme*. Initially the register stated that there was 'no information' about his family, but later it was added that he had a brother who had stayed in an asylum, another one who had drowned and an epileptic sister.¹²² Information about family heredity was added there to emphasize and reinforce the diagnosis.

Degeneration seemed equally a diagnosis for those individuals on the borders between social classes where it was unclear whether they belonged in the *Hospice Guislain* or in the *Maison de Santé le Strop*. The rebellious son of a wealthy family was called a degenerate, because, instead of settling into a bourgeois lifestyle and taking on a profession, he had divorced from his wife and had left Belgium to travel. Superintendent Maere called him an *aventurier*. He had taken service on a ship and had seen more or less the entire world. With money from his parents for which he shamelessly kept asking, he had lived in Australia and America. In November 1901, at the age of 32, he disembarked in the port of Terneuzen from a ship coming from America 'completely delirious' and his

¹²⁰ F.S.R.M. [E] 903 1 sept 1899. & F.G.R.M. 27, 7133, 20 déc. 1907. & 27, 7254, 13 févr. 1909.

¹²¹ F.S.R.M. [E] 913, 31 déc 1899.

¹²² F.S.R.M. [E] 1020, 23 oct. 1903

brother sent him straight away to the *Maison de Santé le Strop*. After examining the new patient, it was concluded that he clearly abused drink. The treating physician remained particularly impressed by this patient's story of parties whereby he would drink 12 *gouttes of jenever* at each stroke of the clock at midnight and it was concluded that the patient had lived a 'dissipated' life. The patient confessed furthermore to have 'abused sexual pleasures' and although the superintendent admitted he was not sure, he believed to find traces of syphilis. This patient was diagnosed as *dégénéré moral* and stayed in the hospital until his death in 1922.¹²³ The label 'degenerate' was furthermore given to those wealthy patients, who lived like vagrants but also poor patients who believed his fellow patients in the public asylum were not sophisticated enough.¹²⁴ The petit bourgeois master-saddle maker who had demanded a transfer was such a case. Whereas in the *Hospice Guislain* he had been diagnosed with 'paranoia and alcoholism', his diagnosis once in *le Strop* read: 'paranoia caused by alcoholism and degeneration'.¹²⁵

A third aspect of *dégénérescence*, which was in fact the basis of it, was indeed the hereditary nature of the affliction, although in most cases socially unacceptable and immoral conduct were the main reason which led to the diagnosis. An unfavourable heredity would only confirm this. There are some examples, however, of patients in the registers of the *Maison de Santé le Strop* who presented 'unacceptable' behaviour where the family background was so significant that they were described as degenerate a priori: they were alcoholic lunatics as an unavoidable result of their family connections, the taint being 'in the blood'. An upper class gentleman, a Baron, for example, who was treated for 10 weeks for 'megalomaniac ideas and persecution' was, according to his file

¹²³ F.S.R.M. [E] 981, 29 nov. 1901.

¹²⁴ F.G.R.M. 16, 5410, 6 déc. 1889.

¹²⁵ F.S.R.M. [E] 917, 3 févr. 1900.

a case of *dégénérence supérieure*. He drank a lot of beer and champagne and the heredity was extensively cited.¹²⁶ But this Baron was by no means the only member of an old important family with a weakness for alcohol who became labelled as degenerate.

The established idea that the medical classification of degeneration epitomized middle and upper class fears of mob uprisings and mass revolts can help to explain the presence of the condition in some of the lower class cases in the Ghent asylums. However, in the Ghent institutions the majority of those alcoholic patients who were treated in the asylum and who were branded as degenerate inhabited the higher echelons of society. Here also, ideology and politics informed the diagnosis. Degeneration of the race was not only located among the working masses; those of the upper classes who, through their decadence throughout subsequent generations had lost vigour and power and had accumulated weak constitutions, were also felt to be degenerate. Their extravagant drinking habits and their wantonness were symptomatic of this degeneracy.

The story of the degenerate Jean D. who was received in 1904 in the *Maison de Santé* is exemplary of a drunkard of the highest classes branded as degenerate because of his family connections. He had only come, as he remarked himself, because he was forced to and would eventually stay for 3 years with the Brothers in Ghent. The D. family was a very important conservative *ultramontist* Catholic Belgian family of eminent industrialists from Tournai dealing in gas and electricity. Jean D. himself has disappeared from the genealogical lists of his illustrious family, probably because he was mentally deranged and was an alcoholic.

¹²⁶ F.S.R.M. [E] 998, 30 sept. 1902.

After being taken care for seven years at home, Jean had become violent against his wife. Consequently his family decided he should go into a retreat in a monastery of redemptorist monks, but he did not get better. After this fruitless experiment, an application to have him declared insane and incarcerated was solicited by his brother-in-law, a judge and member of another eminent Belgian family. The *Maison de Santé le Strop* was recommended to the family as a first-class institution by no less than Professor Xavier Francotte from Liège himself, who also signed the patient's medical certificate. Once admitted at *le Strop*, Jean immediately stole and drunk a bottle of *eau de mélisse de Carmen*, a herbal alcoholic preparation which the brothers used in the hospice as a medicine for all kinds of afflictions. Then, he downed seven bottles of beer and one and a half bottle of wine and it became clear straight away to the treating physician that this patient had a problem with alcohol.

After four days in the *Maison de Santé le Strop*, Dr. Bernard Lefebvre, Catholic senator and honorary physician at the *maison des aliénés* in Louvain, who also treated Jean's alienated aunt at home, came to offer advise with the diagnosis. It became *dipsomanie*, a diagnosis that was confirmed and endorsed by the eminent Catholic psychiatrist Professor Xavier Francotte, although initially the medical authorities in Ghent had registered him as simply suffering from *alcoolisme chronique*. Jean D. was then put on a *régime* of one bottle of wine and two litres of beer a day. For this exceptional patient a special delivery of alcohol free beer from London was arranged. According to Dr. Maere, 'the hereditary taints' with this patient were 'very pronounced [*chargé*]'. Indeed, his father had been an alcoholic, while his mother had had her share of hysteric fits.

Histories of the achievements of his great family did not include either of them.¹²⁷ Then there was the mad aunt, locked up in her own house behind iron bars. Lastly a cousin, was *desequilibré* and kept secret in the family's chateau.

The representation of the drunkard Jean D. and his once powerful Catholic family as degenerate, dragged into a downward spiral of degradation because of contaminated heredity, can be seen as a metaphor for an old Belgium. Jean D. was inevitably degenerate at birth, tainted by his heredity in a family, which after generations of idleness, indolence and intermarrying, was reduced in its vigour and now headed towards its unavoidable decline, which was manifested in Jean's alcoholism. The medical discourse of degeneration and drunkenness among the upper classes can therefore be interpreted as representative of class ideology and politics, similar to what historians studying ideas of degeneration related to the lower classes have previously argued. In the hegemonic voice, that of the liberal, freethinking and industrious psychiatrists, these upper class degenerate patients embody a traditionalist nation unable to adapt, a race on the verge of becoming extinct.

The language of degeneration was omnipresent as a medical confirmation of the worldly decadence of the family D. But whereas the language of degeneration was not so outspoken 20 years earlier, in the 1880's similar ideas about upper class decadence and decline and the negative moral judgement involved, permeated the case history of Baron Gustave van R. and his son Raymond. Here also was the taint 'in the blood'. Excessive drinking belonged to a luxury artificial world of upper class overindulgence.

¹²⁷ KURGAN - VAN HENTENRYK, G., JAUMAIN, S. & MONTENS, V. *Dictionnaire des patrons en Belgique : les hommes, les entreprises, les reseaux*. Bruxelles. 1996. 215-216.

In March 1885 Baron Gustave was brought terribly drunk to *le Strop*. The year before that he had already stayed five months in the *Maison de Santé* in Uccle, with Dr. Ley. Dr. Vermeulen wrote how after this episode the Baron had wrongly 'believed that he could recover his reputation by a parading a luxury lifestyle'. But this was evidently not enough to be credible as an upper class gentleman. In spite of his lifestyle and the fact that the Baron lived with and met with people from his own rank in society, he still continued to look for drinking companions. For some years he had abused alcohol and tobacco and now he was admitted to the asylum diagnosed with *délire et alcoolisme chronique*. When he sobered up again, he explained to the medical superintendent how he had wanted to get involved in the training of horses for the derby and that he had asked, unsuccessfully, for the support of his family to do so. Dr. Vermeulen was, like the Baron's family, not very impressed with these ambitions: 'not under the influence of drink, he behaves well here', he wrote, 'but he expresses ideas that are not according to his social position.' The first of October the Baron was allowed to leave the asylum as recovered¹²⁸.

The ideal of expressing ideas according to one's social position seemed to become increasingly important for the Belgian bourgeoisie in order to maintain its identity as the hegemonic class. The year the Baron arrived in the asylum, 1885, was a year of uprisings, which revealed that the – previously mute and to the eyes of the bourgeoisie invisible – working class had become vocal and threatening. With the founding of the socialist party in the same year its interests became for the first time real and politicised. The legal responsibility of the drunken Baron after being declared insane, was not taken up by a family-member as was usually the case, but by his solicitor and financial trustee, Jules de

¹²⁸ F.S.R.M. D 22, 11 mars 1885. & F.S.R.Mat. 22.

Burlet. The same Burlet, would become an influential figure in Belgian politics. As member of the Catholic party, he would become in 1894 the country's prime minister, at the time of a political earthquake: when the introduction of universal multiple suffrage introduced the first socialist deputies in parliament. But now, almost 10 years earlier, de Burlet was still an upcoming lawyer representing Baron van R, witnessing signs of tension and change on the political and social horizon and observing flaws in the 'racial health' of traditional ruling families. Through his diagnosis and classification of alcoholism and degeneration, the medical superintendent tried to create order, intending to settle individual cases of madness and disintegration. In this endeavour he was assisted by equally ambitious individuals as the lawyer and upcoming politician de Burlet, for example, who took charge of the failing reason the Baron representing the remains of an old degenerate upper class. In doing so, both doctor as lawyer forged their own professional identities, establishing themselves as the incarnation of worldly regeneration; skilful at manipulating unavoidable change to their own political advantage.

After he had left the *Maison de Santé le Strop*, he had immediately relapsed and four months later, a drunken Baron Gustave was brought to the *Guislain* institute. This was an obvious mistake; the public authorities, who had found him drunk on the street had thought they were dealing with a lower-class case. De Burlet immediately took action to have the Baron transferred to the *Maison de Santé le Strop* although the patient himself protested against the transfer. He preferred to stay in the *Hospice Guislain*. Once back at *le Strop*, as treatment he was given first of all *moralisations* and then a small glass of gin. The Baron, when sobered up once more, then started to write to the magistrate to plea for his release. He realised that as an important society figure he would be readily listened to. And indeed, Superintendent Vermeulen, immediately needed to justify his

incarceration to the magistrate. When asked for arguments the asylum-doctor argued that 'the actual mental state of Mons. le Baron can be considered as only a remission, a temporary improvement and not as a recovery. Considering this moral situation, I cannot declare that this dipsomaniac patient can be set in liberty'. Nevertheless, the intervention of the magistrate did secure a certain amount of freedom for the Baron. The medical superintendent agreed to grant him occasional breaks – 'to see if his pathological desire for alcoholic drinks has ceased' – and the magistrate agreed with the proposed measures.¹²⁹ And so Baron Gustave was allowed to leave the asylum now and then. One evening, however, in the next month, he was brought back by a policeman. He was drunk and had 'caused a scandal in town.' In one of the bars he had visited in his drunken stupor, a ring was stolen from his finger. Dr. Vermeulen immediately informed the magistrate that the Baron's outings were of such nature, and consequently he was not allowed any~~longer~~ to leave the *Maison de Santé* where he now stayed until his death, age 41.

The alcoholic Baron was represented in the patient registers as unable to take up the responsibilities related to his position in society and he expressed aspirations completely inconsistent with his class, like preferring to stay in the public asylum rather than to be moved to the luxurious *Maison de Santé*. He certainly did not behave according to the rules of propriety laid out for him in line with his social standing: his drinking habits and his behaviour in public were unacceptable. Finally, as his ring got stolen, he also lost control over his possessions – the last remnant of his social supremacy.

Ten years later, in 1893, a year of much social and political upheaval, one of the Baron's two sons was admitted to the *Maison de Santé*. His mother had requested admission for

¹²⁹ F.S.R.M. D. 34, 18 févr. 1886. & F.S.R.Mat. 34.

her son who was not only drinking, but also smoking heavily since the age of 16. 23 year old Raymond had started a career in the military, but 'extravagant acts' had made those around him doubt about the state of his mental health. He expressed incoherent ideas and he believed the police persecuted him and also that he was going to die. It is not clear what the source of such delusions was, but it is very possible that as an officer in the army he had been involved in controlling and violent curbing of the worker's strikes for general suffrage in 1893 and that this had left a deep impact.¹³⁰ According to the doctor in *le Strop*, the reasons were to be found elsewhere and he believed that Raymond was 'a young man who had abused everything [*de tout*]: women, alcoholic drinks, games, tobacco...'

The doctor certainly remembered Raymond's father when he added: 'combined with his hereditary predispositions, this 'overwork' [*surménagement*] has led to the mental derangement he presents at the moment.' Raymond stayed for 36 years in the asylum, until his death, just like his father.¹³¹ His madness had been a given and irreversible result of his family's taint. Raymond's 'life of eccentricities' did therefore not come as a surprise, considering the laws of heredity. The all-important aristocratic blood that had been tainted with alcohol and through degeneration it had polluted an entire class. This could be countered by hygienic living, moderation and moral strength, as prescribed by the liberal bourgeoisie.¹³²

The representation in the patient registers of the decadent drunkenness of wealthy idle families against the backdrop of overall social upheaval in Belgium on the one hand and

¹³⁰ on the actions of 1891 and 1893 see DENECKERE, *Sire, het volk mort: sociaal protest in België, 1831-1918*. 278-305.

¹³¹ F.S.R.M. D 119, 14 sept. 1893. & F.S.R.M. 119.

¹³² FOUCAULT, M. *Histoire de la sexualité. Vol. I La volonté de savoir*. Paris. 1976. intr.

the overall picture of the lower class alcoholics as dangerous and predisposed to madness on the other represent can be understood as the outcome of a power struggle. The madhouse and its inhabitants became metaphors for the wider political struggle, in which a winner was already decided: it would not be the unruly and drunk lower class representing the irrational socialist masses, nor the degenerate upper class representing the languishing stronghold of old families, but according to the rules of the asylum, it would be the medical superintendent, representing the only healthy option: the liberal, rational way of progress.

With the language the doctors used to classify their patients, they in fact located themselves in a confusing network of confounding social positions. For the psychiatrists, members of a dominant class in a time of change, there was a need to reassert their hegemonic position as rational scientists: vigorous and above all sober. In the patient registers, the medical profession established itself as redeemers of both the drunken madness of the irrational mob that expressed unacceptable political demands and as carers of an inebriated, decadent and languishing upper class. Both groups were to be excluded from society: dangerous lower class drunkards forced away in the *Hospice Guislain* and decadent aristocracy comfortably tucked away within the surreal artificial luxury world behind the walls of the *Maison de Santé le Strop*.

The concern with alcoholic patients in two different mental hospitals in the second half of the nineteenth century and the beginning of the twentieth century as recorded in the patient-registers provides a unique insight into the reception and formation of representations of drunkenness and clarifies wider social relationships within Belgian society. Written between the lines are 'common sense' denominators of social class and

of gender and indications of the forging of identities and of shifting power relationships. The case studies of drunkenness, an essentially unstable concept, expose the mutability of cultural categories and social boundaries. Translated in equally fluid medical language, those categories and boundaries were accepted and contested, interpreted and constructed.

III. Drink in fiction

In the same way the drunkard worried policy makers and medical practitioners, he, or indeed she, fascinated artists and writers. Literary texts and visual images of drunkenness, were established within a series of associations relating the subject back to the social world in which it participated. Literary and artistic representations took on debates that were ongoing in wider areas of culture, but also confronted them and thus re-cast what the drunkard stood for.¹ To various extents, literature and art both assimilated hegemonic structures and equally challenged the dominant ideology.² Writers and artists were not 'merely the mouthpiece of their readers, they are at the same time their advocates and teachers'.³

To derive historical meaning from artistic representations of excessive drinking, the 'text' has to be related back to the system of beliefs of those who produced and those who consumed the book or painting.⁴ The audience for art and literature was mainly bourgeois, as workers and farmers were not keen readers. 'In France the worker reads [...] at least his newspaper. In Belgium, the worker does not read', wrote the French diplomat Charriaut in 1910 with disapproval, 'he has no taste for literature. [...] The Belgian worker has remained retarded in every aspect.'⁵ Illiteracy was high: in the year Charriaut recorded his remark, in Flanders 288 out of 1000 people could not read or write, and primary education became only compulsory at the outbreak of the First World

¹ POOVEY, M. *Making a social body: British cultural formation. 1830-1864*. Chicago. 1995. 153.

² THOMAS, B. *Cross-examinations of law and literature: Cooper, Hawthorne, Stowe, and Melville* Cambridge. 1987.6.

³ HAUSER, A. *The social history of art. Vol. 4. Naturalism, impressionism, the film age*. London. 1999. 5.

⁴ KELLY, R. G. 'Literature and the historian' *American Quarterly*. XXVII, 2, May, 1974. 152.

⁵ CHARRIAUT, *La Belgique moderne. Une terre d'expériences*. 340.

War.⁶ It was repeatedly mentioned by liberals and socialists alike that it was exactly this lack of a reading culture that drove the workers to the pub, the only alternative pleasure available. Socialist leader Emile Vandervelde stated that 'in Belgium one drinks too much and reads too little.'⁷ Before the arrival of socialism at the end of the century, libraries were virtually non-existent and when they were, the clergy mostly exercised a strict regime of censorship and control on what the parishioners read.⁸ All this is important, because it was through these forms of censorship that choice was limited for the small reading public that did exist.

Also, among the bourgeois, culture in daily life was unassuming: visitors and immigrants complained about the lack of vitality of the cultural life in the Belgian capital.⁹ By the end of the century, Brussels counted only 20 bookshops, while Amsterdam, for example, had 129.¹⁰ When a great artist is born to Belgium,' Lalla Vandervelde noticed, 'he usually leaves the country because he feels he has no place in it.' Nevertheless, Belgian art and literature saw an important renaissance in the 1880's and '90's and the countries' artistic avant-garde became very significant. In spite of the

⁶ DE SCHAEPDRIJVER, S. *De groote oorlog: het koninkrijk België tijdens de Eerste Wereldoorlog*. Amsterdam. 1997.33.

⁷ VANDERVELDE, *La lutte sociale contre l'alcoolisme*. 1.

⁸ Cotton worker Pol de Witte remembers how in the 1860's he used to borrow books in Ghent from a private charity supported by *l'oeuvre de bons livres*, a Catholic initiative. Most books in that library were in French and the books in Flemish were mostly moralising works and historical novels, by writers like Hendrik Conscience and Reinier Snieders. Further in Ghent, there were three libraries run by booksellers, where one could borrow books for five cents, the price of a glass of gin. DE WITTE, *Alles is omgekeerd: hoe de werklieden vroeger leefden (1848-1918)*.82.

⁹ The French writer Gustave Mirbeau, for example expressed his disdain for the life in the Belgian capital in a disparaging essay: 'Bruxelles' as quoted in ARON, P. *La Belgique artistique et littéraire: une anthologie de langue française (1848-1914)*. Bruxelles. 1997. 65-76.

¹⁰ REYNEBEAU, *Een geschiedenis van België*. 107.

fact that fin-de-siècle Belgian artists often decided to leave, they insisted that their subjects and the stories they told, were undeniably Belgian.

1. In the countryside

The drunken farmer is a figure that has been prevalent in many fictional representations of the Belgian countryside. Brueghel and Teniers depicted drunken brawls in pubs and kermises and drunken merrymaking was a theme that in the was prevalent in 'popular' fiction like folk stories and songs situated in a rural world. The subject of the countryside and the farmer's way of life was first found valuable for literary and artistic contemplation by romantic artists in the mid- nineteenth century. The drunkard was no longer only described as an affirmative figure, celebrating life, but he became ever more disapprovingly depicted as a habitual drunkard, drinking 'out of place', a negative figure soliciting pity and as a dramatic fallen character.

a. Morality tales: Hendrik Conscience

Hendrik Conscience, in 1855, took on the theme of habitual drunkenness in the novel *De plaag der dorpen* [*The Curse of the Villages*].¹¹ Conscience was the most influential literary figure in the initial movement to promote the Flemish language and culture. He was born in a bourgeois family from Antwerp and was therefore educated in French. Although French was his first language, Conscience was one of the earliest writers who decided to write in Flemish, aimed at the people of Flanders. Most famous were his historical novels and Conscience became known abroad as 'the Flemish Walter Scott.'¹²

¹¹ Translated in English as *The Curse of the Village*. CONSCIENCE, H. *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. London. 1855.

¹² WUYTS, R. *Leeuwen van Vlaanderen. Hendrik Conscience in XIII hoofdstukken*. Antwerpen. 2002. 17.

His works were based on three major themes: fatherland, family and church. Later, his novels have been sometimes criticised as being reactionary and his opponents claimed his writings exuded 'opium smoke'.¹³ It is certainly the case that Conscience had a very direct agenda with his writing: he wanted to influence the life of the country people, to educate them in matters of religion, morality and the value of their Flemish background. This resulted in an idealised representation of the life of the peasants in his stories; a life, which was in reality harsh and far removed from Conscience's romanticised portrayal.

In spite of the audience for Flemish literature in the mid-nineteenth century being very limited, Conscience's novels were among the few books that did reach their audience effectively. Most of the works were adapted into plays, which could also be understood by the illiterate country-people. However, it has often been said that Conscience 'has taught the Flemish to read'. In primary schools his literature was on the reading lists and it was frequently the only literature, apart from religious tracts, that was available in the towns in the sparse libraries controlled by the Catholic Church.¹⁴ Although spoken by five in eight inhabitants of the country, Flemish was considered a language too rude for literature. Baedeker explained in 1884 to visitors to the region that Flemish was not 'a highly cultivated tongue, being spoken by the uneducated classes only and possessing but little original literature.'¹⁵ This situation would slightly change in the second half of the nineteenth century due to the efforts of a group of intellectuals and writers who

¹³ BRANDES, K. 'Inleiding' in ZETTERNAM, E. *Mijnheer Luchtervelde*. Gent. 1943.

¹⁴ Although even there the morality tales of Conscience were sometimes met with opposition. In 1864, Jos de Hemptinne, a Ghent manufacturer, warned the attendants at the *Second Catholic Congress* for the hidden dangers in the reading of Conscience's work. He thought it would be much better to stimulate the people to the reading of the life of saints. Conscience's books were, according to de Hemptinne, a source of discontent and he ordered to have the works removed from the Ghent people's library. WILLEKENS, E. & DEGROOTE, G. *Hendrik Conscience en zijn tijd*. Antwerpen. 1983. 135.

¹⁵ BAEDEKER, *Belgium and Holland: Handbook for Travellers*. xvi.

wrote in Flemish, as part of a nationalistic reaction against francophone control. People like Hendrik Conscience, and a generation later Stijn Streuvels, 'forged' with their literature a Flemish language that was different from the Dutch used in Holland, merging aspects of the different dialects spoken in Flanders.

Conscience explained in the concluding chapter of the *De plaag der dorpen* that initially he had been reluctant to address drunkenness, because he would have to depict 'a picture which could excite no emotion but disgust'.¹⁶ But his friend, a priest, told him how in his village a farmer had ruined himself and his family with his drunkenness and he persuaded him with the argument that he could teach an important moral lesson with the story. Conscience thus explicitly wove the subject of drunkenness into a morality tale to warn its readers against the dangers of gin. The drunkard in the story was Jan Staers, a widower. His only daughter Clara suffered badly from her father's vice. The reader is introduced to a tortured man, who after a night of heavy drinking was aware of his weakness, who realised the seriousness of his situation and especially the consequences for his daughter. But a single glass of gin led to an abrupt transformation in his personality. After his necessary dram, Staers would transform into a cold and aggressive, jealous and proud man.¹⁷

Clara's neighbour, young farmer Lucas, loved her, but his father, the modest and wise tenant farmer Torfs, initially refused to accept the match, although he considered the pious and virtuous Clara a perfect daughter-in-law. Clara's father, the reader learns, had wasted his entire fortune and fame on drink and neighbour Torfs feared that the drunkard would ruin his son's future after his marriage with his daughter. Both farmers

¹⁶ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 140.

¹⁷ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 46-50.

rented a house from the same landlord; Torfs lived in a modest clay cottage, and Staer's family had always been able to afford to live in a stone house. But Torfs had now saved money, accumulated through 'twenty years of hard work and thrift' and 'a good landlord', while Staers had squandered his fortune and could no longer pay the rent.¹⁸ Conscience evidently wanted to promote the virtues of hard work and loyalty to the landlord as it was highly unlikely that a tenant farmer would be able to save much.¹⁹ It came as no surprise that ruined farmer Staers, who had called his landlord defiantly 'a blood-sucker', received a visit of the bailiff at the stone cottage to confiscate its contents.²⁰ Then neighbour Torfs came to the rescue, proposing to rent a small house where his unfortunate neighbour could live with his daughter. He proposed Jan Staers to work for him as a labourer to pay for the rent of it on the condition that he would abstain from all drinking.

Having lost the last part of his former fortune, the drunkard had no other choice than to agree to Torf's proposal and managed to stay sober for a few days. Until one Sunday, when, while his daughter went to church, his old drinking companion, the sand-digger [*den zandboer*], came to see him and presented him with a bottle of gin and an invitation to go drinking in the village pub. One can assume that, peddling sand to cover the cottage floors from door to door, the sand-digger would have been habitually offered glasses of liquor by his customers. Here, he had hopelessly succumbed to too much drink and now won over struggling alcoholic Staers. The cultural thematic of the Christian idea of temptation is very powerful in this novel. Conscience represents the character of the sand-digger as irredeemable and always drunk, having lost his position

¹⁸ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 54.

¹⁹ BOONE, M., GAUS, H. a.o. *Dagelijks leven: sociaal-culturele omstandigheden vroeger en nu*. Deurne. 1982. 149.

²⁰ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 54.

in society completely. With his 'brutal and repulsive face [...] which grinned behind the flask', the sand-digger embodied the devil, offering temptation to the struggling drunkard.²¹ After cowardly taking money that his daughter had saved by doing work at night, Staers followed the sand-digger to the pub with the expected disastrous results.

By depicting the drunkard Jan Staers as originating from a wealthy background, Conscience evaded one of the main concerns within the broader discussion on drunkenness: its recurring provenance in poverty and misery. In Staers' case, drinking was not the result but the cause of his financial ruin. His material demise was embodied in the loss of the stone house while the poorer, but morally superior family, the Torfses, who used to live in a clay barn, now could afford to rent out a house to their now poor neighbour.

While the house was central in the story, symbolising material prosperity maintained by sobriety, the wife and mother, the keeper of the house, became the custodian of that sobriety. Unlike the husband, who in his public life could be easily enticed into immorality and vice, the wife was not only better protected against temptations within the cottage walls, she was also considered morally stronger and less prone to fall under the spell of temptation. Widower Staers had easily drifted into his present debased state, because he lacked the civilising presence of a wife. In Conscience's universe, it was part of the wife's responsibility to draw her husband away from the temptations of drink. In a marvellous, long drawn scene, the wife of farmer Torfs, mother Beth, advised her future daughter-in-law, Clara, on the ways in which she could achieve this:

²¹ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 108.

What you must take care of especially is that you never – never, do you hear? – allow him to remain a quarter of an hour in a public house from the time of your marriage. As soon as you notice anything of that kind, then begin to be vexed, look sour, and scold, and so on, without easing. Men can't stand out against that, and they will do anything we like to be quit of our everlasting seesawing on one thing, as they call it.²²

The wife's campaign to keep her husband from drinking, as promoted here by Beth, was not aimed at his own moral feelings or responsibilities, but instead at his need of self-preservation in a marriage with a harassing wife. In some comical pub-songs, husbands were depicted as drunk and not interested in the household, while nagging wives were to convince their husband to stop drinking and to hand them over the money for the household instead. Songs like *Huwelijkstwist* [Marriage Dispute] and *De dronkaard en zijne vrouw* [The Drunkard and his Wife] were comical duets where the men present would sing the part of the drunkard, unwilling to come home, ridiculing his wife when she came to the pub in search for him, while the women in the choir had to answer with begging pleas. In both songs the arguing partners made up at the end of the story, with the husband's promise to drink less.²³

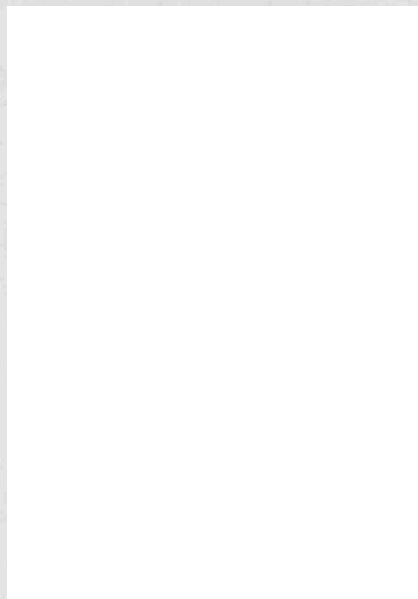
The comic value of such songs lay in the possibility for the singers to identify with their roles and to recognise the opposed values and positions put forward in it. By singing the song, the performers would equally revise those proposed principles to contain their own social practices. In these songs women were not always left without a voice, on the contrary, they defended their rights and duties as protector of the household. The

²² CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 115-116.

²³ 'Huwelijkstwist (duo)' & 'De dronkaard en zijne vrouw (duo)' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 235. & 442-443.

arguments of the reformers, the idea of thrift and the place of the woman in the household were shared by the women themselves, although in their own terms. In the social drama's that were played out here, identities were projected and reinforced within a shared system of fiction, which allowed the singers to make sense of their experiences.²⁴

Although in *De plaag der dorpen*, Beth Torfs instructed her future daughter-in-law how to prevent her future husband becoming a drunkard, once the mischief had been done, a fashion for melodrama cast the wife, but also the innocent children, in the role of passive sufferer, left only to beg their husband or father to give up drinking. The narrative of the martyr wife, unwearyingly suffering her husband's possibly violent drunkenness and protecting her children, was central everywhere in the discourse on drink. Realist painter Charles De Groux painted her in several paintings.²⁵



22. CHARLES DE GROUX, *L'ivrogne*. s.d [1870] Musées royaux des Beaux-Arts de Belgique. inv. 2254.

Bruxelles.

²⁴ TURNER, V. 'Social drama's and stories about them.' *Critical Inquiry*. VII, 1, autumn, 1980.156.

²⁵ DENOËL, T. & LEGRAIN, P. *Le nouveau dictionnaire des Belges*. Bruxelles. 1992. 184.

Not only wives but also children were depicted as the innocent victims of the careless drunk. In pubs people would not only sing along with humorous songs about the drunken husband and his wife, but also with heart-rending ballads with this melodramatic theme of suffering children. One well-known song told the story of a child pleading unsuccessfully with his father in the pub to come home where there was no fire left. Every hour the child returned with a worse scenario: at home his mother was weeping over his dying baby brother. When the brother finally had died with the father still in the pub, the child came to tell the father that his brother's last words had been 'kiss father farewell from me'.²⁶ This story was repeated in endless versions and Charles Degroux again, painted also this scene in many versions. In *L'ivrogne* [*The drunkard*] from 1852, he portrayed children leading a tottering drunken father into a room towards a bed in which their mother has just died, with a baby still at her breast.



23. CHARLES DE GROUX, *L'ivrogne*. 1853 Musées Royaux des Beaux-Arts de Belgique. inv. 2556. Bruxelles.

²⁶ 'Kom t'huis' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*.61.

While there are a few indications, which help to trace the impact of literature on audiences, the impact of visual images on broader groups in society is still more difficult to grasp. Mostly the viewing of paintings remained reserved for bourgeois visitors of salons and exhibitions, although many were reproduced in print and became well known images. Charles Degroux' images were popular and reproduced on for example biscuit-tins, although no examples representing the drunkard can be shown.

Critics sometimes accused Degroux of socialist sympathies, but mostly his work, wavering between moralising and melodrama, solicited compassion and pity.²⁷ When Degroux' painting *Scène de cabaret*, which depicted a little girl trying in vain to revive her dead-drunken father in the café, was put on show on the Brussels Salon in 1868, one critic addressed the bourgeois audience:

'you all, favoured by fortune, who sees with a weary eye the misery of the people around you, you will feel, if only for a moment, a generous thought coming up, for the sufferings of your wretched brothers, when De Groux with his artistic eloquence exhibits it before your eyes.'²⁸

The narrative taken up in De Groux's paintings, the Karel Waeri's bar-songs and in Conscience's description of the suffering wife and children of the male drunkard, epitomize a shared fascination with the suffering of the family of the drunkard. The interest in these stories crossed class boundaries. The bourgeois at the Brussels's salon admired the realist paintings, while the songs were listened to and sung by working

²⁷ ARON, *La Belgique artistique et littéraire: une anthologie de langue française (1848-1914)*. 129. & TODTS a.o., *Het volk ten voete uit. Naturalisme in België en Europa*. 17-18.

²⁸ STARK, D. E. 'Charles de Groux et le réalisme social dans la peinture belge.' in DEWILDE, J., DUVOSQUEL, J.-M., & MEESSEN-DONEUX, A.-M. eds. *Charles Degroux, 1825-1870, et le réalisme en Belgique*. Bruxelles. 1995. 41-56.

classes and farmers in the cabarets, but Waeri would also sing his song, an adapted repertoire, in the bourgeois cafés in the centre of town.²⁹ Both lower class and bourgeoisie read the rural novel by Conscience.

The stereotypical casting of the wife and children of the drunkard as central figures in the stories confirmed and reinforced the emotional involvement of the public in their plight and their appreciation of existing cases in the 'real' world. These melodramatic accounts constitute a moral stance aimed at provoking emotions of disapproval and condemnation towards the drunkard. The omnipresence and popularity of such cultural expressions cast the moral denunciation of the drunkard through the struggle of the suffering wife and family firmly into the public sphere.³⁰

Jan Staers was extremely worried about the response of the neighbours when realising his downfall:

[...] fathers will point me out to their children as an example that they must lay up in their terrified hearts. My story will be told again and again a hundred times and I [...] will be dying of shame and spite [...] and down below in the street they will be laughing, jesting, scoffing, and calling out aloud that I have deserved it!³¹

It was in fact a neighbour who brought the news that he had found Staers seemingly dead along the side of the road to the Torfs family, where his daughter Clara was playing cards. Lucas managed to convince his father to recover the drunkard for his girlfriend's sake. They found Staers in a terrifying state, 'his eyes open and glassy, his

²⁹ VAN DE MERWE, *Gij zijt kanalie, heeft men ons verweten! Het proletariërslied in Nederland en Vlaanderen*. 283.

³⁰ Cfr. the 'performance' of the wives of drunkards in the Ghent asylums and its reception. II Drink and the doctors.2 In practice: the alcoholic population of the Ghent asylums. pp. 205-207.

³¹ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 104.

lips blue' after apparently being 'seized with cramps or convulsions' and they had to wheel him home in a wheelbarrow.³² This public display was the drunkard's ultimate humiliation and the family members sighed with relief when they arrived home, 'fortunate enough [...] without meeting'³³ anyone

Although drunkenness was always represented as a vice, in Conscience's language metaphors of medicine overlap it. In the title itself, drunkenness is a *plaag*, literally translated as 'plague' or 'pest', and Clara talked about the possibility of her father being 'cured'.³⁴ When Mother Torfs complained about the growth of drunkenness in the countryside, she exclaimed 'the vile habit of gin- is gaining ground in our villages like a contagious disease.'³⁵ The use of medical language to refer to drunkenness contributed to indicate the severity of the problem. Identifying excessive drinking with disease, brought drunkenness within a framework of gravity and seriousness, directing it away from its more readily positive associations with sociability and holiday.

Nevertheless drunkenness was never directly represented by Conscience as an organic problem, but always as a moral issue attributing ultimate responsibility to the drunkard as a sinner. But even though Conscience did not mention biological heredity as a possible cause of Staers' drinking, there was no doubt in Conscience's mind when he wrote down the story of the drunkard that Jan Staer's parent's moral inheritance was to be held accountable for his actual state. In Staer's upbringing the seeds were sown for his drinking problem in adult life. He came from a family of wealthy farmers, but they had made an unforgivable mistake in the eyes of the writer and the corresponding Catholic

³² CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 130.

³³ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 133.

³⁴ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 34.

³⁵ CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 72.

social character: 'they lived too high and gave themselves more airs than are becoming in country people.'³⁶ They had higher ambitions for their son than for him to be a farmer and they had sent him to a school 'where lawyers and doctors are made.' But after a few years Jan had enough of the studies and wanted to be a farmer after all, because he – not rightfully of course – believed it would be easier. Then his parents made a next mistake: instead of accustoming their son to the heavy labour, they spoiled him, let him do his will and gave him money. Father Torfs, explaining the history of the family next door to his son, agreed with the pastor that 'idleness is the fountainhead of all vice' and so it was certainly no surprise to the villagers that Staers had landed up in pubs and bars, drinking ever more.

The two worst features of character Conscience could think of were imbedded in the personality of Jan Staers: pride and laziness, while the hero tenant farmer Torfs exhibits exactly the opposite qualities: modesty and thrift. Whereas Lucas, Torfs' son had, 'inherited' those noble feelings, Clara, Staers daughter did not follow in her father's fatal footsteps. As a woman, Conscience believed she surely possessed higher moral standards. Clara was a soothing presence, a 'comforting being within these harsh scenes'.³⁷ The story ended happily for the suffering and thus deserving Clara. She moved with Lucas Torfs into the stone farm and lived a long and happy life together with Lucas' parents. The hero, old farmer Torfs was victorious and became, in an extremely unlikely ending, mayor of the village. But for the drunkard there was a disastrous end in store. The moral lesson of the story was concluded in the horrible and painful death of Jan Staers.

³⁶ '[ze] hadden het in hunne bovenkamer en lieten zich meer voorstaan dan aan boerenmensen wel past' CONSCIENCE, *The Curse of the Village; and the Happiness of Being Rich. Two Tales*. 9.

³⁷ EEKHOUD, G. *Hendrik Conscience*. Brussel. 1881. 121.

Whereas drunkenness was commonly represented as a danger lurking in the cities, Conscience situated it at the heart of a countryside community, calling it 'the curse of the villages'. Drink indeed destroyed most of what Conscience loved so much about Flemish life village. In Conscience's Flanders, position in society was defined by material wealth and moral strength and the influence of drink was disastrous for both. The romanticised vision of an organic society where everybody knows his place was turned topsy-turvy by the presence of the marginal figure of the drunkard, unable to conform. Conscience's disapproving portrait of the drunkard and the strong moral condemnation of his behaviour by the morally superior sober characters surrounding him, introduces us to an idealised world of neatly ordered moral hierarchies and the marginalised, but threatening place of habitual drunkenness within it.

While the Flemish farmers were not reading much 'literature' in the conventional way, their own cultural expression consisted in the telling of stories, passed on orally from generation to generation. Storytelling around the fire during long winter evenings was a typical pastime in the rural villages in Flanders in the middle of the nineteenth century.³⁸ Superstition was paramount in the perception of the environment in the countryside communities and the stories often had aspects of the supernatural. They did, however, always relate back to the context that generated them and incorporated contemporary concerns and themes: the stories therefore present valuable patterns of culture and an insight into the mental universes of the peasants.³⁹

³⁸ BERG, M. V. D. *De volksage in de provincie Antwerpen in de 19de en 20ste eeuw*. 1993.vol II. 1231.

³⁹ BURKE, P. *Popular culture in early modern Europe*. London. 1978. chapter 6. 149-177. & BAUMAN, R. *Story, performance, and event: contextual studies of oral narrative*. Cambridge. 1986. 2. & DÉGH, L. *Narratives in society: a performer-centered study of narration*. Bloomington. 1995. 41.

Alcohol featured regularly in these stories, mostly in instances of someone seeing an appearance of the Virgin Mary or a ghost under the influence of too much drink. In rural Limburg, many stories were told about *alvermannetjes*. These were a type of dwarf who would come to help farmers with their work on the field or housewives with the housework during the night, in return for some food or drink. One of these stories relates the end of the positive relationship between farmers and dwarfs: once people had started to offer them gin as reward, they had stopped appearing. The dwarfs had become addicted to drink and did not want to work any longer.⁴⁰ This story of the demise of the *alvermannetjes* was a metaphor for the end of an era of magic and storytelling. It embodied a sentiment of regret for the passing of an old way of life. Gin became perceived as a creation of modernity, a by-product of industrialisation, irreversibly transforming the long-standing structures of ordered society. Strong liquor, specifically gin, was furthermore, under the influence of the rhetoric of the church, often represented in stories as belonging to the devil. One story, which was passed on in many variations, tells of a group of friends who played cards in the evening. When one of them expressed the wish to have a glass of gin and complained about the lack of a bottle in the house, one of the other players – a man who was suspected to have relations with the devil – said that he would ‘send the jack of spades to get a bottle’ and he threw that particular card out of the window. A few minutes later the men saw a bottle appear in the window with a jack of spades attached to it.⁴¹

⁴⁰ The Germanic languages department of the Katholic University in Leuven have collected folk-stories online <http://www.volksverhalenbank.be/>

⁴¹ <http://www.volksverhalenbank.be/> FBECK0291-0291; RCELI0226-0226; TDANI0300-0300; COOMS0181-0181; APRIN0187-0187, 0188, 0189; APRIN0203-0203; DTRUY0132-0132.

Conscience, as a romantic writer with a stake in the Flemish nationalistic movement, was much interested in rural folklore and storytelling as part of it. He himself and the myth that became constructed around him as a writer of the people, liked to represent him as a figure at the centre of storytelling. A well-known print shows Conscience telling stories, in a peasant's farm surrounded by attentive listeners around the fire.⁴² The writer resorted to the genre of the folk story to impart his moral message on drunkenness in a short story written in exactly the style of this old oral tradition. Possibly he imagined that his fable, called *Een uitvinding des duivels. Helsche geschiedenis* [*An Invention of the Devil. A History from Hell*] would be taken on by the people and would start to live on within their oral tradition. Conscience had started to think about the subject of drunkenness for a second time after a debate about the problems of the 'gin-plague' organised by the *Société littéraire de Courtrai*, a discussion society that the writer himself had set up and which convened in *Café Belge* over a pint.⁴³

In this new tale published first in 1864, Conscience told the story of how the devil invented gin in the 17th century. Distillation processes were indeed much improved during this period and it was then that the product became generally known in Europe.⁴⁴ The reader is introduced to the court of Queen Death, with her courtiers: Mother Plague and her daughter Cholera, Father Famine with son Typhus and Knight War. Other courtiers were named after other diseases: Yellow fever, Chickenpox, Mania, Epilepsia etc... They all felt bored and complained to their Queen about lack of occupation. The Queen was not well herself: 'Nerves are the worst plague to us women,' she complained

⁴² VAN HAGELAND, A. *Hendrik Conscience en ons volksleven*. Aartselaar. 1984. 21.

⁴³ WILLEKENS a.o., *Hendrik Conscience en zijn tijd*. 133 & 153.

⁴⁴ VAN SCHOONENBERGHE, E. 'Brandewijn veroverd de wereld.' in VAN SCHOONENBERGHE, E. ed. *Jenever in de Lage Landen* Antwerpen. 1996. 63-70.

'and even queens on the throne do not escape it.'⁴⁵ But then the message came that her cousin the devil, King Lucifer, had invented a potion of death, which would solve the problem of the jobless inhabitants of hell. The devil arrived with his own following: the Sins, the Vices and the Crimes and he explained how he had invented a poison that

by its taste and its effects would bewitch man in such way that he would gulp it down as a life-giving and comforting foodstuff. [...] it would suffocate the moral powers of man and load him with sins and evil deeds and thus guide him into the vortex of hell. ⁴⁶

Queen Death, however, realising how bad the potion tasted, did not want to believe him. To prove his point, the devil presented her with scenes from the future, which showed her the effects his poison would have in times to come.

The different panoramas related to drunkenness that Queen Death glimpsed through the Devil's time machine corresponded to familiar sensational narratives of the mid-nineteenth century. First of all there was the story of the poor household with a crying mother and hungry, dying children, while a delirious father, the provider for this family, danced and laughed: 'stupid and furious as an unreasonable animal'.⁴⁷ The devil then presented his cousin to the struggles of a wealthy family who had sent their son to university, where he had become 'slave of the poison' of the devil. He could not finish his studies, had to disappoint his parents and finally killed himself.⁴⁸ A scene in a lunatic asylum followed, where those who had become insane as a result of their drinking had

⁴⁵ CONSCIENCE, H. *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. Brussel. 1904. 130.

⁴⁶ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 140.

⁴⁷ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 157.

⁴⁸ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 158.

to spend their miserable days. Then we look inside a prison, where all those who had committed crimes under the influence of alcohol were locked up, among whom a husband who in his bout of drunkenness had axed his wife's head. A fifth scene showed a ship in a storm, which was doomed to perish. Because of the mistakes the inebriated crew made the vessel could not be kept under control.

These scenes Conscience chronicled to illustrate the curse of alcoholism in the nineteenth century are the same stereotypical stories that would be ceaselessly used and reiterated by the medical anti-alcohol campaigners in years to come. Conscience not only cited drink as a cause of poverty and misery but also established a connection between drink and crime and drink and lunacy. But while the story was written in 1864, the temperance movement that would retell these imaginary scenes over and again would only come into existence in Belgium and also in France a decade later. But in Protestant countries, the USA and Britain and also in Germany and the Netherlands, an anti-alcohol movement was already prominent from the first half of the nineteenth century onwards.⁴⁹ In Britain temperance was a mass movement, which claimed in the mid-nineteenth century a following of hundreds of thousands.⁵⁰ At the heart of their propaganda was melodramatic imagery of the possible dangers of drink. Over the years, parts of this cultural repertoire had crossed the Channel.

Thus, George Cruikshank, the illustrator of *Oliver Twist*-fame, published a series of temperance drawings depicting the gradual ruin of a family as a result of alcohol, titled *The Bottle*. These eight plates were available in Britain for the first time in 1847 where

⁴⁹ HARRISON, *Drink and the Victorians: the temperance question in England, 1815-1872*. & ROBERTS, J. S. *Drink, temperance and the working class in nineteenth century Germany*. Boston, Mass. 1984. & VAN DER STEL, *Drinken, drank en dronkenschap: vijf eeuwen drankbestrijding en alcoholhulpverlening in Nederland*.

⁵⁰ GOLBY a.o., *The civilisation of the crowd. Popular culture in Britain 1750-1900*. 123.

they had caused a sensation, selling 100 000 copies in just a few weeks. The images had appeared numerous times in print and had literally entered the middle class household with depictions of it on cups and tea plates⁵¹. Fifteen years later, in 1862, the series of *The Bottle* was introduced in Belgium by hygienist, early temperance campaigner and translator Paul Bouquié-Lefebvre, who published the drawings in Brussels under the title *Les dangers de l'alcoolisme*.⁵²

Hendrik Conscience knew Bouquié-Lefebvre from translation work the latter had done of some of his earlier writings, and in 1855 Bouquié-Lefebvre had requested the writer's permission to translate *The curse of the villages* in French.⁵³ It is safe to assume that Conscience had seen Bouquié-Lefebvre's edition of the prints of Cruikshank. The stories the drawings of *The Bottle* told about drunkenness were almost identical to the narratives Conscience presents us with in his story of *The Invention of the Devil*. In *The Bottle*, as in Conscience's fable, drunkenness was linked to misery and poverty. Plate V in Cruikshank's series showed the family of the drunkard in an empty house, crying over the cradle of the youngest baby who had just died. Then followed, as in Conscience's depiction, scenes of domestic violence concluding in a scene where the husband 'in a State of Furious Drunkenness' killed his wife. The last illustration revealed the drunkard turned madman, locked up in an insane asylum as a result of drink, a scene also portrayed in Conscience's story. The similarities between Cruikshank influential

⁵¹ UPSTONE, R. & HOLDEN, C. *George Cruikshank's the Worship of Bacchus in focus*. London. 2001. 16-18.

⁵² Paul Bouquie-Lefebvre wrote *Des Causes et des Résultats de l'intempérance, ainsi que des moyens de la prévenir & de la combattre* in 1857. but had already published 10 years earlier an article on the abolition of strong liquors, translated from Flemish, in the Brussel's *Gazette médicale belge*.

⁵³ Bouquié-Lefebvre had translated *Wat eene moeder lijden* commissioned by Alexandre Dumas, who had just moved to Brussels in the early 1850's and had shown interest in the work of the popular Flemish writer. WILLEKENS a.o., *Hendrik Conscience en zijn tijd*. 99 & 104.

illustrations and what Conscience described in *The Invention of the Devil* are immediately apparent.



24. GEORGE CRUIKSHANK, *The Bottle*. 1847. Plate VIII. The Bottle Has Done Its Work - It [...] has Left the Father a Hopeless Maniac.

Madness had constituted the final stage of degradation of Cruikshank's drunkard and also in Conscience's fable, insanity was a possible outcome of drinking the devil's potion. Hendrik Conscience described the alcoholic inhabitants of the asylum as follows:

[they behave] like stupid animals, with whom all feeling, all reason, all conscience had disappeared. They are dead and still alive, they carry a person's name, but are no longer human beings. Among them, there are many whose head staggers, whose limbs tremble, whose features are deformed into the faces of monkeys. What makes them tremble and stumble, is a disease, which is called delirium tremens.⁵⁴

⁵⁴ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 159.

As discussed, delirium tremens was an affliction that was generally known: French and English doctors had described it already in the beginning of the nineteenth century, and Joseph Guislain had prominently elaborated on it in a Belgian context in 1850.⁵⁵ Conscience had certainly heard of cases of sufferers from alcoholic mania who were brought to the insane asylum. The wider diffusion in Belgium of the image of sufferers of delirium tremens placed in an asylum, as represented here in a work by an influential cultural figure as Conscience, corroborated and confirmed already established views and practices. The idea of the asylum as a desirable place to house delirious drunkards was hereby accommodated further into general acceptance and shared beliefs. Three years after Conscience published his story of delirium tremens in the asylum, the affliction would become institutionalised, when the minister of justice formally stated it to be a condition that allowed for legal internment in a lunatic asylum.⁵⁶

But whereas delirium tremens was a known problem that was more often associated with the asylum, another form of drunkenness that Conscience located in the lunatic asylum as well, was hardly heard of. In his story some drunkards had become mad and placed in the asylum because they had drunken an extraordinary liquor: absinthe.

All these miserable creatures were once powerful because of their reason, powerful by their intelligence, powerful by their science.... What are they now? A lump of numb meat, less intelligent than the most stupid animal. Ah, they mixed my poison with green herbs and gave it the name 'absinthuim

⁵⁵ PORTER, 'The drinking man's disease: the 'pre-history' of alcoholism in Georgian Britain.' 385-396. & See above: II Drinking and the doctors. 1. In theory: the medicalisation of drunkenness p. 222.

⁵⁶ See above: I Drinking in Belgium. 2. Drink and revolution: the politics of drink. p.69.

helveticum', and thus strengthened its power on the soul, without diminishing the power on the body.⁵⁷

Historians have tried to understand the extraordinary preoccupation with absinthe in France and its impact in Belgium at the fin-de-siècle.⁵⁸ In this period absinthe became related to a particular form of alcoholic madness: 'absinthisme'. But the anxiety about absinthe as a cause for madness was not heard of in England where the drink was not or very little consumed, and thus popular temperance tracts, which made up possible sources for Conscience's narratives, like Cruikshank's illustrations, did not refer to this particular drink. But in France too, where the drink would become most popular, the first medical publications pointing out its dangers had only just started to appear in the 1860's. These early clinical experiments would certainly not have been general knowledge when Conscience wrote his story in 1864.⁵⁹ Only 10 years later would the medical world in Belgium engage for the first time in the particulars of the relationship of absinthe and mental disease, when Valentin Magnan published his important work on alcoholism and when an analysis of it was printed in the *Bulletin de la société de médecine mentale de Belgique*.⁶⁰

⁵⁷ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 159.

⁵⁸ PRESTWICH, P. E. 'Temperance in France: the curious case of absinthe.' *Historical Reflections/Réflexions Historiques*. VI, 2, 1979. & NYS, 'Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' 411-436.

⁵⁹ A first study of the so called *absinthistes* was undertaken by dr Auguste Motet at Bicêtre who wrote a *thèse de doctorat* in 1859 titled: *Considérations générales sur l'alcoolisme et plus particulièrement des effects toxiques produit sur l'homme par la liqueur d'absinthe*. The French specialist on alcoholism, Valentin Magnan had just only started his extensive research on alcoholic insanity in 1864, the year Conscience published *The Invention of the Devil*. CONRAD, B. *Absinthe: history in a bottle*. San Francisco. 1988. 20.

⁶⁰ B.S.M.M.B. 1874, 23-54. & NYS, 'Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' 425.

So where did the Flemish writer find the inspiration for this actual representation? At first sight it seems unlikely Conscience would have based this depiction about absinthe use and lunacy in Belgium in the mid nineteenth century on actual cases among the people in Flanders, as he had supposedly done for *The Curse of the Villages*. Absinthe was hardly known in Belgium and certainly not in the Flemish countryside where Conscience situated his reading audience. Moreover, as in France, at this moment in time only wealthy people would be able to afford the drink, which would not become more readily available until the last decades of the century.⁶¹ And even then, absinthe was always drunk by specific groups, interested in the cultural connotations of a bohemian and artistic way of life attached to the undeniably French drink.⁶²

Absinthe came to symbolise modern decadent French movements. A few years before Hendrik Conscience wrote his moral fable, condemning absinthe, in 1859, Paris the young painter Manet had shocked the official Salon with his painting of an absinthe drinker. His appalled teacher had exclaimed that he had 'lost his moral faculty'.⁶³ In the same year French writers Gustave Flaubert and Charles Baudelaire had both processes pending for outrage against the public mores. The last had just written his *Paradis Artificiels*, a work that was considered a celebration of decadence, alcohol and drugs. In this period many prosecuted French artists had found refuge in liberal Brussels. Victor Hugo had arrived in Brussels in 1851 and many writers, editors and painters were to follow him. Charles Baudelaire would come to live in the Belgian capital in 1864, the year of publication of *An Invention of the Devil*.⁶⁴ With these French artists and

⁶¹ PRESTWICH, 'Temperance in France: the curious case of absinthe.' 302.

⁶² NYS, 'Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' 411-436.

⁶³ FRIEDRICH, O. *Olympia: Paris in the age of Manet*. New York. 1992. 27

⁶⁴ PICHOS, C., ZIEGLER, J. & ROBB, G. *Baudelaire*. London. 1989. 215-339.

intellectuals came their lifestyle, of which the drinking of absinthe at the hour of the *apéritif* formed part. Belgian writer Camille Lemonnier described how the drink slowly entered social life in Brussels in the second half of the century with the arrival of these French political outlaws:

One could find, as at five or six o'clock at Monmartre, the Boulevard Saint-Michel and the terraces of the Boulevard des Italiens, also here, the dilluted intoxication of absinthe, until now almost unknown in Brussels. For the very first time the drink of 5 sous [25 centimes] showed up at the tables, but 5 sous was a lot of money for those poor outlaws. There were those who out of economy chose the Boonekamp [gin] of 10 centimes.⁶⁵

While, as Lemonnier's remark shows, French exiles opted for the cheaper alternative of gin as offered in their guest country, the French habit of drinking the more expensive absinthe was taken on by Belgian literary figures. One of whom was Conscience's French translator Léon Wocquier. Wocquier was a bright scholar, with degrees in philosophy and literature, law and political sciences. He had become professor at he Ghent university and he could be spotted working at his translations in Ghent in the bar *la Carpe* in the university quarter at the Kortrijksepoort, 'with a glass of absinthe'.⁶⁶ But in 1860, aged 39, Conscience's translator had to be admitted in the mental institution *le Strop* after suffering 'illness in his head' for many years.⁶⁷ There, the doctors agreed that it was indeed abuse of alcoholic drinks, especially absinthe but also a bad heredity,

⁶⁵ LEMONNIER, C. *Une vie d'écrivain*. Bruxelles. 1994. 65.

⁶⁶ SEYN, E. M. H. *Dictionnaire des écrivains belges. Bio-bibliographie*. Bruges. 1930. t. II. 2095-6.

⁶⁷ DEGROOTE, G. L., DE SCHUYTER, J. L. H. a.o. *Hendrik Conscience en zijn uitgevers*. Brussel. 1953. 104, br.53.

excessive use of tobacco and debauchery, that had lead to his current mental calamity, which was recognised as 'general paralysis' and 'dementia'.⁶⁸

Conscience had been close witness of more cases of madness within his intimate circle whether or not possibly related to drink. He mentioned that in the same year 1860, the classicist and translator of Milton's *Paradise Lost*, Domien Cracco, had died in the same private asylum.⁶⁹ Ten years earlier, Conscience's good friend, the poet Theodoor van Ryswijck, had passed away aged 38, having lost his reason after an 'undisciplined and carefree life, having known misery all the way'.⁷⁰

In a letter to his editor, explaining the problems he encountered with his French editors after his translator had fallen ill, Conscience exclaimed: 'It is frightful, this Disease of Writers', referring both to excessive drinking and the lifestyle that accompanied it, as well as to the mental instability as a result of it.⁷¹ Léon Wocquier would die in *le Strop* in 1864, the year Conscience wrote down his terrifying story about the plight of those suffering from 'absinthisme' in the asylum.

Conscience's concern with absinthe and madness was thus related to cases he had witnessed within his own social circle. Absinthe was associated with people exploring the boundaries of accepted cultural categories – writers and artists – who often lived at the margins of society, like some of Conscience's friends. The artistic free spirit, embodied by absinthe, can be easily understood in terms of loss of reason, in the context of the strictly ordered social system of nineteenth century Belgium, as defended by

⁶⁸ *Fonds St. Alfons Régistre Médical*. [9] 10, 10 may 1860.

⁶⁹ DEGROOTE a.o., *Hendrik Conscience en zijn uitgevers*. 104, br.53. & *F.S.R.M.* [5], 1855, 18.

⁷⁰ SEYN, *Dictionnaire des écrivains belges. Bio-bibliographie*.t. II. 1967.

⁷¹ DEGROOTE a.o., *Hendrik Conscience en zijn uitgevers*. 104, br.53.

Conscience and the dominant social opinion with him. Conscience certainly disapproved of the bohemian lifestyle upheld in the cultural environments in which he saw the drink used. The restrained and dignified morality campaigner Hendrik Conscience felt he needed to caution his readers about the risks, which he feared most within in his own urban society.

Fears and anxieties engendered by a social system under threat were very prominent in one last very significant scene in the story of the *Invention of the Devil*. After having seen the ravages of delirium tremens and *absinthisme*, Queen death was still not convinced of the damaging powers of the Devil's potion. 'In an hour', she said, 'Mother Plague can kill thousand times more'. To convince her, the devil showed her one last, devastating scene proving the destructive powers of his poison. She looked through the camera in the future and was confronted with an apocalyptic panorama: a scene of racial degeneration:

an entire race of humans passes by, the kind which one calls on earth 'working class people'. There are men, women, elderly and children. The long use of my poison has made its effects hereditary from father to son. [They are] a degenerate [*verbasterd*] race, that seems to be stooped under a general curse. All are yellow or colourless, with hesitant eyes and emaciated limbs. One is hunchbacked, the other limp, some are bent; many have red, tearful eyes; but all are without power and courage; the blood that's running through their veins is as watery as the blood of insects.⁷²

Theories of alcoholic heredity were already established within the medical world in 1864 when Conscience wrote this. But, overall it was only at the end of the century that

⁷² CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 162.

such ideas were making a more profound impact in on wider general culture.⁷³ As in the case of absinthe, Conscience's early attention here to these medical themes, certainly contributed to the spread of those ideas within wider Belgian society. The terrifying metaphor of the group of degenerated workers as insects, infesting society, is very striking. The image Conscience depicted here, of 'a race of humans passing by [...] stooped under a general curse', was repeated, in a different context, almost 30 years later, when social painter Eugène Laermans depicted the then current theme of a workers' strike.⁷⁴ Conscience, who had in 1864 just moved from the provincial town of Kortrijk to the Belgian capital Brussels, had certainly seen the crowds of emaciated workers marching past on their way to the factories. Attributing their evident appalling physical condition to alcoholic heredity and not to their miserable living conditions as a result of economical exploitation was a likely, although not necessarily conscious, reading of such scene by a bourgeois writer, who needed to dissociate himself of the responsibility of his class.

The sad cortège of degenerate workers, Queen Death saw, was accompanied of ghosts of disease flying around them, and the Devil continued to explain:

My poison has created those ghosts who you can see accompanying them, [...] they are the ailments and diseases that are called: Scrophula, Rachitis, Anemia, Ascitses, Atrophia, Cachexia, Cacochymia....⁷⁵

The diseases mentioned, which for Conscience originate in the excessive use of gin, would by others be rather associated with malnutrition and bad hygiene, or in general,

⁷³ see further in the work of Cyriel Buysse p. 288 & Camille Lemonnier p. 310 & 327 for example.

⁷⁴ See further. III. Drink in fiction. 2. The city. Eugène Laermans. *Un soir de grève/Le drapeau rouge*. 1893 p. 305.

⁷⁵ CONSCIENCE, *Een zeemanshuisgezin . De dichter en zijn droombeeld . Eene uitvinding des duivels*. 162.

with the kind of living conditions the workers and farmers had to endure. Health was always a vital concern and a threatening reality among the lower classes and diseases were menacing the people like unattainable ghosts. Conscience's reading public was certainly not educated enough to understand what the medical terms he quoted contained. But the inventory of their Latin names, gave the account a terrifying ring, which suited the supernatural element of the diseases' representation as ghosts. The representations of diseases and vices lurking around the offspring of the drunkard will be repeated in the Catholic political discourse on alcohol half a century later. As ideas of heredity become much more prominent, such representations would surpass the supernatural and imagination and invoke medicine directly, to add weight to the political message.

The two scenarios Conscience described of the degenerated workers and of the madness by absinthe, were certainly not directly connected to realities to be experienced in the countryside. Nevertheless, it was there that the writer localised his audience and where he positioned his story by its traditional form of a supernatural fable with the devil and ghosts. Conscience's personal apprehension about drastically changing ways of life as he experienced it in the city, crept into his fable to be told as a warning in his idealised, still relatively uncontaminated, Flemish countryside. He connected modern medical discourses with earlier accounts of sin and compassion, inspired by religion. The existing myths and stereotypes of drunkenness abroad were by Conscience interpreted within a Belgian context, aimed at Flemish audience. As a widely read author, Conscience promulgated those images, these connections and associations with drunkenness and its possible dangers for the individual family and society. They resurfaced in different shapes and forms during the entire period, but were here for the first time expressed within a Belgian context.

b. God's nature dictates: Stijn Streuvels

Stijn Streuvels, pseudonym of Frank Lateur belonged to a next generation of Flemish writers. His literature still paid tribute to the Flemish countryside and its people, their way of life and their religion and unlike Conscience, who was a bourgeois gentleman, Streuvels was a tradesman, a baker, who became a self-taught writer. Also unlike Conscience, who wrote about the countryside, but lived in the city, Streuvels lived his entire life in the countryside. His novels became so successful that he could leave his bakery and live off his work in his cottage in the country. With Conscience, Streuvels became one of Flanders' best loved writers.

Langs the wegen [The Long Road] was Streuvels' first full-length novel, published in 1902.⁷⁶ It told the story of Jan Vindeveughel, a simple stableman on a farm with a weakness for drink. The reader meets Jan as a drunkard for the first time very early in the novel. When Jan received a letter announcing his father was dying, his immediate reaction was to leave for a drinking spree. The wife of the farmer he worked for immediately understood where he had gone when he did not show up for work the next day: 'she knew that the slightest thing could send him off the rails and that then drink was the only thing he could think of.'⁷⁷ In the character of Jan, Streuvels invokes the stereotype of a 'typical' Flemish farmer, which appeared in so many other texts: he is sturdy, submissive and introverted, with an 'inborn' need of alcohol to overcome his social reticence. Jan needed to go back along 'the long road' to the village where he was born, but arrived too late for the funeral and the other family members had left already. His

⁷⁶ Literally translated *Along the Road*, it was published as *The Long Road*, in Boston in 1976, translated by Edward Crankshaw.

⁷⁷ STREUVELS, *The Long Road*. 15.

old drinking mates recognised him and invited him to drink to celebrate his homecoming. Upset by only finding an empty house and an abandoned plot of land, Jan accepted.

Like Conscience, Steuvels was interested in the abrupt moral transition of his main character from sober to drunk, but he offered his readers a deeper psychological insight into the internal struggles of the alcoholic against the backdrop of conformist social life in a rural community. He described the transformation as a moment of schizophrenic disconnection between thoughts and actions. The writer created a main character made up of two personalities, one a likable, sober and hardworking farmer and the other a violent and irresponsible drunken one:

This [the drink] killed the ordinary Jan in him, the sober reasonable simple fellow who showed such a serious, self possessed face to the world. He was that other Jan standing outside him, watching this new Jan who was drunk and behaving like a fool.⁷⁸

A next theme that re-emerged time and again with Streuvels in much the same way as it did with Conscience, was the matter of respectability and the loss of it through repeated excessive drinking outside the framework of sociability. At special occasions drink and drunkenness were certainly accepted behaviour, although Jan, the alcoholic, was always suspicious. At his own wedding, for example, everyone of the company got drunk, but Jan was terrified that he would not be able to 'keep hold of his senses'.⁷⁹ Similar to Conscience, Streuvels used religious imagery of the fight between good and evil and of the devil as the incarnation of temptation.:

⁷⁸ STREUVELS, *The Long Road*. 37.

⁷⁹ STREUVELS, *The Long Road*. 83.

that tyrant demon that rode on his shoulder, violently and unexpectedly jerking him away from his work, carrying him away like a whirlwind, while he, clumsy and defenceless, yielded to a force he did not understand. It simply overcame him, giving him no time to reflect that he was behaving badly, squandering his earnings, and running open-eyed in his ruin.⁸⁰

But Streuvels represents Jan's drunkenness seated deep inside his body and soul and it 'comes to the surface' as a result of outside forces. Therefore, unlike in Conscience's view, for Streuvels, writing half a century later, drunkenness could no longer be kept easily under control by personal strength and resistance to temptation. The devil of temptation was now housed within the body and mind of the drunkard himself and not embodied in a third person, a 'tempter', like the sand-digger. Drunkenness now had become part of a larger force of nature; it was constituted within the human condition, internalised into the very workings of body and mind.

When Jan woke up, the morning after his first spree in his hometown, he was mocked by passers-by and realised with great shame that he was lying in the rubbish dump next to the bar, without trousers. The drunkard was also here a character that was known in the village, who was ridiculed and marginalized. The scorn of society for the drunkard and his public condemnation was touchingly depicted by Eugène Laermans, who represented the tragedy of the loneliness and exclusion of the drunkard with his family, with nowhere to go, having to leave the security of the village community behind on a cold winter's day.

⁸⁰ STREUVELS, *The Long Road*.55.



25. EUGÈNE LAERMANS, *L'ivrogne*, 1898. Musées royaux des Beaux-Arts de Belgique, inv. 4414. Bruxelles.

In Charles Degroux' sentimental work, 25 years earlier, the drunkard always continued to form part of society. He was represented within a social setting, in a bar or at home and he was always urged to come back home, to take up his responsibilities as husband and father and thus to become again part of society. But now, in the naturalistic world of Eugène Laermans, in 1898, the segregation of the drunkard had become an unavoidable consequence of his actions and he was irreversibly cast out of society.⁸¹

Also in Stijn Streuvels' novel the drunkard would eventually be expelled, as *Langs de wegen* was the story of an inevitable decline. The sober Jan's life consisted of hard and monotonous work on his small plot of land. He had married his neighbour, Vina, because the priest and the other neighbours expected this from him. As in *De plaag der dorpen*, here, it was also the moral power of a wife that could control the husband's

⁸¹ Laermans depicted the poor always as outcasts see TODTS a.o., *Het volk ten voete uit. Naturalisme in België en Europa*. 157-161. & ROBERTS-JONES, P. a.o. *Eugène Laermans, 1864-1940*. Crédit Communal, Bruxelles. 1995.

drinking habits. After his wedding with Vina, Jan had vowed he would he never drink again, out of respect for his pious wife.⁸² Seasons passed, children were born and children died because the household was constantly lacking. However much Jan toiled on the land to provide for his family, he did not succeed in being self-sufficient. And the father's unremitting want to drink always loomed as an imminent calamity over the household. One day it, as if unavoidable, 'it came'.⁸³ Jan took money from the household fund, went on a spree and came home drunken and violent:

It was all over now, and there was no mending matters; the devil had entered his soul and must rage unrestrained. [...] He beat the children to hear them howl and kicked his wife to test her patience. And when everything was completely wrecked he ran out waving his arms in the air and rushed off, no matter where, never to return.⁸⁴

In *Langs de wegen*, the wife's moral authority was supplemented with that of the village priest and it was the last one that convinced the penitent drunkard to go back home again, 'with head bowed in shame'. In Streuvels religious universe, the urge for drink became a sort of 'inborn sin', like Catholicism's original sin, in a similar way as Dr. Van den Corput had connected alcoholism with degeneration.⁸⁵ Repentance and humility could absolve the sin of the drunkard. Jan was a weak character, completely determined not only by the nature surrounding him but also by his own. The drinking took control of his actions in much the same way as nature's whims were in control of his field. Such perception of the origin of Jan's drinking relieved him from responsibility for his

⁸² STREUVELS, *The Long Road*. 54.

⁸³ STREUVELS, *The Long Road*. 105.

⁸⁴ STREUVELS, *The Long Road*. 108

⁸⁵ see II. Drink and the doctors. 1. In theory: the medicalisation of alcohol. pp. 154-157.

dramatic attacks of violence. Because of the drunkard's lack of free will, Streuvels did not judge him as severely as Conscience did. In the battle between man and nature in Streuvels' work, nature always won and drink was understood here as one of those forces of nature influencing man directly in his social interactions. Only when the farmer could be one with nature, when he toiled on the land, did he feel comfortable, as nature was as unpredictable as his own self. Culture, however, and the contact with human society and its emotional consequences confounded Jan and his passion for drink was unleashed as a response to his inability to cope with the emotional idiom of social interaction.

When Vina, exhausted, passed away, Jan's life disintegrated. Although he tried hard, he could not manage to stay sober. With the children running wild and the household budget no longer checked, Jan lost his house and his neglected children consequently deserted him. The loss of house and possessions had been the fate of Conscience's drunken farmer and similarly at the end of Streuvels' story, Jan was left with nothing. He had to leave the village, like the drunk that Laermans had painted.

Another contemporary artist, James Ensor caught beautifully the desperate mood of Streuvel's story in a painting and a drawing both depicting drunken farmers. In *Le Buveur*, of 1882, he drew a desolate, lone farmer, a character like Jan Vindeveughel, in front of a table with a bottle of gin. In *Les Pochards*, [*the Boozers*] a painting of a year later, Ensor showed a similar scene, with two drunken farmers sitting at either end of a table. On the wall behind them, a poster is pinned informing the customers of the pub of the availability of a farm for rent.



26. JAMES ENSOR, *Les pochards*. 1883. Collection George De Graeve.

The endurance of this particular image of the drunken farmer is significant. The relationship of the farmer, his unstable condition and the bottle, was always interpreted in contradictory ways. The defeated drunken peasants here evoked the real precariousness of the situation of the Belgian rural population, as their excessive drinking habits were possibly driven by economic misfortune and Ensor here shows real human suffering. But, an image like this was not necessarily to be read as a critique of a 'wrong' economical system. It could also lead to understand that the loss of material possessions, land and home, were the result of the 'typical' Flemish farmer's immorality and drunkenness and Ensor, tellingly, called the forlorn duo in the bar 'the boozers'. Whereas in Conscience's morality this certainly has been the scenario, in *Langs de wegen*, drinking was in this way ambiguous: it simultaneously steered Jan's misfortune but functioned at the same time as solace from the harshness of his life.

After having lost everything, Jan Vindeveughel became a loner, he did not speak to any one anymore. He went begging in the streets until the priest suggested that he buy a blind donkey for sale. This allowed him to become a driver for the farmers who

would give him something out of pity and to regain a vestige of respectability in the community. Jan then became blind himself and eventually walked back, begging along 'the long road', to the place he originally worked, where he was taken in by a new generation of farmers.

The story of Jan was a story of degeneration: Jan and his offspring were hopelessly predestined, heading towards unavoidable disaster. Streuvels expressed this in the Darwinian language of the description of arrested development of Jan's degenerate baby whereby 'the glimmering spark of life was threatened constantly with extinction.'⁸⁶ Streuvels explains how Jan's sons like their father needed drink to soften the physical and emotional bleakness of their lives and how they would become cruel, cold-blooded villains. They had not wanted to continue to farm to survive as their father had done and decided to try their luck in the brick making works in the north of France. When they returned to the town after their first season as brick makers, their first stop was the village pub where they became terribly drunk. When their father finds them there, he was delighted to see them, but his sons made fun of him and laughed at his misery. They mistreated his donkey, until they brutally killed it and with the wine they brought back from France, they made their father drunk.

Excessive drinking, brought on by misery and related to cruelty and violence, became an easy and almost inevitable downfall within the harsh life of the Flemish countryside. Poor Jan, who could not afford to indulge in drink, only sporadically succumbed to his passion. His sons, who now earned more in France did not have such imposed financial restraints any longer. The importance of the environment, of poverty and misery, was central in the campaign against drink led by socialist supporters. But unlike the

⁸⁶ STREUVELS, *The Long Road*. 114.

socialists, who used this argument to make a case for change, Streuvels did not attribute to his characters the power to react against their environment. Streuvels' conception was profoundly Catholic and deterministic as God's nature determined all man's actions. Stijn Streuvels understood excessive drinking as a human passion, looming within the essential make-up of people. It was attached to the human body as part of a greater divine nature, that challenged man's willpower and moral strength, but was always the ultimate in control.

c. Nature dictates: Cyriel Buysse

With his naturalistic story *De biezenstekker*, Cyril Buysse scandalized the Flemish literary world in 1890. The hard and raw novella was unanimously condemned as immoral and 'disgusting'. Buysse wrote himself in a letter to a friend: 'I do believe I have gone a bit too far; but nevertheless, such histories and even much more unpleasant ones I have known happening.'⁸⁷ The story was first published in a Dutch periodical *De Nieuwe Gids* and as was to be expected in Belgium it was immediately rejected both by the traditional Catholic critics but also by a majority of the more liberal elements of the literary Flemish movement, of which Buysse himself formed part.⁸⁸ Far removed from the ideology offered in the work of the likes of Streuvels and Conscience, which was deemed to embody exactly that what was a desirable national identity, Buysse's novella was felt to be 'contrary to the Flemish character'⁸⁹.

⁸⁷ "Brief aan Emmanuel de Bom, Nevele 28 juni 1890" in VAN DIJCK, L., LISSENS, P.J. & SALDIEN, T. *Het Ontstaan van Van Nu en Straks. Een brieveneditie 1890-1894*. Anwerpen, 1988.8.

⁸⁸ BUYSE, C. 'De biezenstekker.' In: *De nieuwe gids* 5 (1890) 2, p. 186-212.

⁸⁹ DELBAUT, R. "Cyriel Buysse" in BUYSE, C. *Romans en verhalen*. Leuven, s.d. inl. p 7.

Unlike the traditional Flemish literature, which praised the peasant's way of life as pure and uncorrupted, the country life Buysse depicted was immoral, harsh and rough. Buysse declared that he admired Emile Zola and that his own work, and particularly his early work, including *De biezenstekker*, was influenced by French naturalism. But although naturalism claimed to be steeped in reality, this does not mean that what Buysse described in his work can be taken at face value, as direct examples of 'reality'.⁹⁰ Free-thinking liberal Buysse, the son of a wealthy manufacturer, lived literally and metaphorically far removed from his farmer subjects. 'The description of reality is different than that reality,' Cyriel Buysse had said himself, 'if the artist did not add anything to reality, he would not be an artist.'⁹¹ Therefore, the historian needs to continue to 'read against the grain', just as when evaluating other cultural expressions.⁹²

In his writings, Cyriel Buysse criticised the brutalised, illiterate peasant life and the narrowness and religiosity of the villages. The writer himself felt suffocated within the parochial atmosphere of country life and this feeling was communicated in his work. The reception of Buysse's work in Belgium is significant: his stories were hardly ever read, of the twenty-five works the writer had finished by 1911, barely three hundred copies were sold.⁹³ Catholic libraries and schools forbade his novels for their readers and students, because they were considered unsuitable and immoral. Most of Buysse's books were edited in more progressive Holland where the writer himself eventually emigrated.

⁹⁰ DE NIL, 'Cyriel Buysse en het biefstukkensocialisme: spiegel van de beeldvorming over socialisme en socialisten in de Vlaamse roman: een bericht over een lopend onderzoek.'

⁹¹ D' OLIVEIRA, E. 'Cyriel Buysse' in D' OLIVEIRA, E. *'De jongere generatie' (vervolg op 'De mannen van '80'):* gesprekken met vertegenwoordigers van de nieuwere richting in onze literatuur; tevens een enquête naar enkele beginselen in ons nationaal geestelijk leven. Amsterdam. 1914. 65.

⁹² ALLEN, J. S. 'History and the Novel: Mentalité in Modern Popular Fiction.' XXII, 1983. 234-240.

⁹³ VAN ISACKER, *Mijn land in de kering: 1830-1980*. 149.

In Belgium, his bleak portrayal of poor farmers and their sombre way of life was felt to be offensive and scandalous. Also *De biezenstekker*, a story of a rude farmer's family led by drink, was never accepted by most of the cultural elites in Belgium. The new socialist movement, however, did appreciate Buysse's work. They approved of what they felt was a realistic representation of social and economical relations, in Buysse's descriptions of exploited farmers, entirely at the mercy of all-powerful capitalist landowners. So it came about, that the only ear lent to Buysse's stories was with progressive, socialist groups within society, that were feared as 'subversive' by the establishment. In 1899 Buysse adapted *De biezenstekker* for the theatre and four years later a socialist amateur theatre group of factory workers in Ghent presented the work for the first time on stage. The committed drama, now interpreted as an indictment of the poverty and social inequality of the Flemish countryside, was received as a revolutionary work in an activist urban setting.⁹⁴

In *De biezenstekker* a poor and degraded farmers's family named Cloet suffered under the hand of an aggressive alcoholic father. Whereas in Streuvels' *Langs de wegen*, the father's drunken violence had always led to repentance, here its grim result had been repeated prison sentences. The novella starts with Cloet on his way home from prison where he had been detained, as a result of the incriminating testimony of his neighbour, Rosten Tjeef, for stabbing someone during a fight. Like Jan Vindeveughel, also Buysse's farmer Cloet was a rough man, unable to express his feelings, requiring alcohol for courage. Thus significantly, Cloet needed to drink to face the emotional moment of meeting his family again. When he arrived home he understood why his wife had stopped visiting

⁹⁴ BUYSSE, C. 'Driekoningenavond' (1899) in *Verzameld werk*, VI, Brussel, 1979. 823-865. & MUSSCHOOT, A.-M. *Cyriel Buysse*. Antwerpen. 1996. 323.

him during the last three months of his prison-sentence. Infuriated, fuelled by his drunkenness, he attacked, his pregnant wife and nearly killed her.

When neighbours came in to intervene, Cloet assaulted Rosten Tjeef with a bread knife. Cloet was once more arrested and sent to prison for another five years. Arriving home this time, he found apart from his own four children, a little boy sitting at the table. Without word or comment Cloet started to live again with his family posing a constant and silent threat. Devoid of any social interaction, he ate and slept alone, while working his land 'to which alone he wanted to be indebted for his existence', [...] 'with the obstinacy of a rooting animal' and supplementing his farming income with work in the tough brick-making industry.⁹⁵ Farmer Cloet was Cyriel Buysse's version of the criminal drunkard, the pathological type discussed in the criminal anthropological societies.

Nothing could bring Cloet out of his sombre and introverted way of life, 'not even the litres of beer and gin drunk in the evening'.⁹⁶ As in Streuvels' story, in *De biezenstekker*, the rigidity and hopelessness, the cruelty and nakedness of the main characters' emotional life, was only expected to be softened with drink. But while in Streuvel's book the wife had been always the redeeming character, here the mother and wife was as morally debased as her violent husband and she was in fact the more prominent drunkard. The mother's drinking however, was more secret than her husband's: the bottle was 'hidden' and only the writer, as all-powerful observer, knew and imparted to the reader the extent of the mother's tippling.

Wife Cloet had allowed herself to lapse entirely and due to her craving for the bottle she had abandoned her role as mother and wife. Cruel and hard-hearted, she had lost all her

⁹⁵ BUYSSE, 'De biezenstekker'. 646 & 658.

⁹⁶ BUYSSE, 'De biezenstekker'. 647.

female features. First of all, it had been her unwomanly, animal- like hunger for sexual gratification that had brought the illegitimate pregnancy about. Then also, her household had become completely disorganised, and what was worse, she did not longer mind. Through her drinking, 'in the degree of moral degradation she had reached, she had forgotten to care about the neglect of her duties', commented Buysse.⁹⁷ And lastly, rather than protecting and caring for her child, she abused her bastard son Julken. The new child had become the black sheep of the family as his mother wanted him to beg for his living instead of sending him to school like his brothers and sisters. Julken only found affection with his little dog and with his neighbour, Rosten Tjeef, who had healed from the stabbing, and who was – the reader can guess – the boy's biological father. Ill-treating Julken was a way for his mother to show her husband her regret for her unfaithfulness during his absence. Julken became ill and always weaker, embodying both the character of the *enfant martyr* terrified by an alcoholic father as that of the degenerate offspring of a drinking mother.⁹⁸

The climax of the story is muddled in alcohol, as Julken's mother needed her portion of Dutch courage to prepare for the terrible act she was about to perform: the degraded, drunken mother tried to suffocate her sick child in his bed, but in the last minute lost the nerve to do so. Buysse explained, that the mother was not herself during this horrible undertaking , but that she found herself in a state of insanity, suffering from 'a continuous fever, caused by drink and nerves.'⁹⁹ After this key moment, the story takes a turn from harsh naturalism to melodrama, when instead the mother killed Julken's little

⁹⁷ BUYSSE, 'De biezenstekker'. 646.

⁹⁸ MELCHIOR, *De jeneverplaa, of het alcoolisme in België*. 60. & STEVERLYNCK, C. *Kleine martelaars : een historisch document over misbruikte kinderen, kindermishandeling, incest en prostitutie*. Antwerpen. 1997. 239.

⁹⁹ BUYSSE, 'De biezenstekker'. 654.

dog, after which Julken died as well from misery. The same evening the child died, farmer Cloet spoke again to his wife during dinner, asking for beer. Afterwards the parents slept together for the first time since 6 years, with the bastard son's dead body in the next room. The elimination of the weak, unwanted child was the moment of the return to 'normality' and the ending of the story.

In the chaotic family of the rough farmers in *de biezenstekker* drinking was the norm. The weak Julken, tainted by his heredity, was the outcast, who needed to be expelled. Unlike what was to be expected in a 'normal moral universe' as Conscience's or Streuvels' had envisaged, here it was not the drunkard who was to become the outsider. Instead within the debauched reality of the Cloet family, created with the naturalist pen of Buysse, the innocent child and his dog, a melodramatic duo, became the victims and the marginalized characters. What made this such a cruel story, was that in the end, against all odds, the debased drunkards survived and even more shockingly, they procreated. The final act of sex after the death of the 'cleansing influence' in their lives is momentous. Julken was the one with the power to shake their conscience, who had awakened their emotions, their anger and their realisation of their corrupted lives and their dependence on drink. The negative ending of the story in a ruthless natural determinism, is very significant for the brute naturalism of Buysse, where in a spiral of degeneration the drunkards will beget even more morally and physically deteriorated offspring.

According to the conventions of naturalistic writing, the language of this novella, written in 1890, is full of references to physical and mental degeneration. Julken represented degeneration: he was 'an outcast of nature, a child of sin'. The name itself, *biezenstekker*,

with which the villagers called Julken, 'meant the poor misshapen and retarded child of an unknown father,' Buysse clarified.¹⁰⁰ Being also the degenerated child of an immoral and drunken mother, Julken suffered from attacks of psychosis, which made him shudder 'crying and mad' [*verwilderd*], with trembling hands and rolling eyes and scarily distorted face.¹⁰¹ Metaphors of animals and their way of life as opposed to a civilised human existence are omnipresent. Buysse lets Darwinian hereditary theory explain Julken's position in his family:

Among the animals when such a deformed individual [*een avorton*] appears, it is usually, instead of being defended, mistreated and oppressed by the stronger individuals of the race. The same happened here with the little boy.¹⁰²

Buysse's characters, unlike Streuvels' and Conscience's were not aware of their weakness of drinking, even more shockingly, they did not consider it a weakness and consequently did not fight against it. The idea of awareness of one's moral responsibility so strongly present in Conscience and constantly negotiated with much struggle in Streuvels, was essential within the Catholic faith which was practised by both writers. God was in this view the ultimate judge, as in cases of bad harvest and potato famines; but man had a responsibility to take care of that what was given, to work the fields until his back broke and to fight his inborn desire for drink. Thus even if God had endowed humans with passions, it was a necessary response to fight against them, with or without effect. Buysse's agnosticism allowed nature – Darwin's nature, not God's – to take central stage and in a truthful naturalist fashion his characters became dependent, not only on their environment but also on their biological urges.

¹⁰⁰ BUYSSE, 'De biezenstekker'. 648

¹⁰¹ BUYSSE, 'De biezenstekker'. 653.

¹⁰² BUYSSE, 'De biezenstekker'. 648

Buyse was not the only avant-garde controversial artist who boldly represented a drunk farmer's wife. The image another dissenter of the Belgian art world, Félicien Rops, drew of the drunken farmer's wife could be a fitting illustration for the story of *de biezenstekker*.



26. FÉLICIEN ROPS, *Dimanche*. 1883. Musée Félicien Rops, Namur.¹⁰³

Rops was a friend of Camille Lemonnier and Charles Baudelaire and was considered by his fellow artists as a leading light of fin-de-siècle. Like so many of them, Rops had also decided to move to Paris, where his bohemian lifestyle and subversive art were more tolerated. Rops was known as a painter of sexually perverse scenes and his drawing of the drunken woman farmer was interpreted exactly so. With her breasts poking out of her opened blouse, she lies dead-drunk on a table-top with a pitcher of beer and a mug next to her, supporting her head on her arms, just as Degroux' had depicted his male drunkards. But unlike Degroux' character, the woman here was not shown within the setting of a public place, in a cabaret where the drunkard was surrounded by other characters, other gossiping patrons and his tormented wife, which located him within an intelligible social and moral framework. Rops' drunken farmer's wife was represented

¹⁰³ I need to thank Bernadette Bonnier at the Musée Félicien Rops for her help.

against a neutral, black background. By calling the work *Dimanche*, [Sunday], Rops told the story of the farmer's wife drinking alone in the intimacy of her home, a scene he shockingly made public by painting it, while her husband was amusing himself in the bar with his male companions.

Also Félicien Rops, like so many other artists were fascinated by what he presumed to be the unbridled passions of the farmers that expressed itself in the ample opportunity of getting drunk. Female drunkenness was by Rops immediately linked to unrestrained sexuality. Apart from the naked breasts also the naked upper arms and plump lips of the drunk farmer's wife suggest sexuality. Jo Tollenbeek has explained how decadent artists at the turn of the century in this sense 'glorify that what in the degeneration thinking was constructed as horrifying.'¹⁰⁴ Félicien Rops was always keen to shock and had already in 1866 represented an absinthe-drinking prostitute, a subject he would repeatedly paint during his entire career.¹⁰⁵ Interestingly for the historical interpretation of Rops' image of the female drunk, is that the artist was inspired by a seventeenth-century Dutch genre-painting by Jan Steen, called *Het verlopen huishouden* [The Dissolute Household]. There also, a female character slept on the table, next to a large glass of wine while other characters were depicted in metaphorical sexual settings.¹⁰⁶ It was only when known 'pornographer', Félicien Rops, translated the world of the Breughelian debauchery of the 17th century genre painting and focused instead on the secret experience of the individual woman farmer in the nineteenth century, that it became incredibly shocking. It was felt to be too close to the bone, representing a possibly

¹⁰⁴ TOLLEBEEK, 'Degeneratie, moderniteit en culturele verandering. Een Belgisch perspectief.' 308.

¹⁰⁵ NYS, 'Groene toverdrank of gebottelde epilepsie?' Absint in België omstreeks 1900.' 420.

¹⁰⁶ BONNIER, B., LEBLANC, V. a.o. *Félicien Rops: Rops suis, aultre ne veulx estre*. Bruxelles. 1998. 96.

existing reality to propertied classes who harboured anxieties about decadent artists and female drunkards alike.

In the same way controversially, Cyriel Buysse did not only represent drunken women but also drunken bourgeoisie, always in the countryside. In 1905, in *het bolleken* [*The Little Ball*] he described how the boring, numbing life in the countryside would lead its upper class inhabitants to drinking. Throughout the novel, Buysse showed how medical versus popular ideas about health and drunkenness were intertwined, and criticized both the doctor, who was to diagnose alcoholism, as well the drinker himself.

When, in the novel, Nonkelken became ill, he believed he suffered from a problem that he himself called 'the little ball' of the title. The patient felt in his throat a little ball and it was as if that could be removed, he would become better. This could be an allusion to the psychological problem of *globus hystericus*, the disturbing sensation of a 'lump in the throat' caused by emotional disorder or anxiety. Nonkelken was a wealthy man of leisure, one of 'the village dignitaries', who had passed a life of pleasure in the nicest and largest house of the village. Buysse explains how his life had existed out of eating and drinking, hunting, horse riding, archery and visits to the pub. Every morning Nonkelken could be found in the local village pubs behind his little glass of gin. He had never married, but enjoyed a passional sexual relationship with his maid, Flavie. However, Buysse's description also infers that Nonkelken's life was empty and lonely. When at his deathbed, his cousin Vital asked the doctor what was actually wrong with his uncle, the medical man answered 'brutally accenting the last syllable of the word as if it had three o's: 'l'alcool'.¹⁰⁷ The little ball was, according to the doctor, in fact simply an infection of the oesophagus, caused by the vast amounts of gin Nonkelken had drunk. Nonkelken's

¹⁰⁷ BUYSSE, 'Het bolleken'. 308.

excessive drinking habits were those of what we would call today, an alcoholic, needing a dram in the morning to start the day.¹⁰⁸

especially in the early morning he felt very bad and it only became better, but very much so, after having drunk a few glasses. That was the best and even the only means, much more efficient than all the powders and pills and mixtures the doctor made him take.

Buyse's irony hints at his ignorance of Nonkelken rejecting superior medical cures and believing alcohol to be invigorating. But it also alludes to the problem of alcohol dependence and its possible psychological causes, overlooked by the village physician. Nonkelken himself considered alcohol as the solution of his problems, rather than the cause, insinuating the existence of underlying, veiled trouble for which alcohol seemed to offer a consolation. Buyse underlined thus the lack of insight into a patient's mental health by a pretentious, but ultimately uninformed medical practitioner, who, like the general public, too readily ascribed Nonkelken's death disease directly to alcohol alone.

Because with the doctor, also the entire village knew and was convinced that Nonkelken had died from 'l'alcool et Flavie' – alcoholic and sexual excess –, but it was talked about in hushed terms, never out loud. After his uncle's death his heir Vital, who was living in the city and studying for a degree in law, gave up his studies and moved to the countryside, taking up residence in 'the little castle'. Shocked by the way his uncle had died, Vital made up his mind never to indulge like that:

How was it possible, he thought [...] Nonkelken had gradually killed himself with a slow working poison. [...] Drink, with which came the tendency for all

¹⁰⁸ BUYSE, 'Het bolleken'. 307.

kinds of other excesses, was the enemy, the great enemy, the vengeful enemy of the happiness of wealthy people. He should never forget this; he would be always on his guard.¹⁰⁹

Of course the opposite, inevitably happened. Even for a cultured and critical city dweller like Vital, it was impossible not to be dragged away in the numbness of the village life. When his marriage proposal to an aristocratic heiress of the nearby castle was brutally rejected, instead of escaping the small-mindedness of his fellow villagers, he embraced it. He married, far beneath his status, the daughter of a small innkeeper, who used to serve him his liquor, which he ended up enjoying too much. Vital, in his turn became gradually dependent on alcohol, also without himself realising it. He knew, nevertheless, that too much to drink could be harmful for his health, but an intriguing pseudo-scientific practice of self-diagnosing health problems related to excessive alcohol would keep this under control. Vital's friend, the brewer's assistant Tahon explained how:

Gentlemen, who went on regular nights out and especially brewers and distillers, who were obliged to drink much, in the long run started to suffer from their kidneys. The doctors called this 'albumerie', or discharge of albuminous matter, or 'uremie', all those strange names they invented to scare patients and to keep them under treatment as long as possible, while the situation [*het zaakje*] was very normal in the end and could be checked by the patients themselves without any problems.¹¹⁰

The testing method consisted of the analysis of one's urine in a test-tube by adding a liquid to be bought from the apothecary. After letting the urine settle overnight one would notice 'a grey, yellowish substance, as fine sand' at the bottom of the tube. If this

¹⁰⁹ BUYSSE, 'Het bolleken'. 316.

¹¹⁰ BUYSSE, 'Het bolleken'. 446.

was only little, elucidated Tahon, there was no problem and one could happily continue to drink, but if there was a lot of it, one had to drink a bit less for a few days, until the level of the substance had come down again: 'it was as if your doctor was always in the drawer of your night table'. This episode, whether or not based on actual practices, alters yet again the vantage point of notions about medical authority. Not medical language, but the 'tools' of 'science': the chemical empirical test sanctioned a particular lay-diagnosis here. In the story, the local doctor, disapproved strongly of those practices; he declared it was quackery and that it should be denounced by the government. But Tahon reassured Vital he should: 'just let them talk and quietly continue as you were doing, because everyone understood very well why the doctors were against it.'¹¹¹

The doctors were seen by the people as characters who were keen on reforming, meddling and interfering, in order to claim the expertise on sickness and health and the influence of drink on it, for themselves. Lay people were remedying their health themselves and were not much affected by the health advice of professionals related to heavy drinking. But in the same episode, by showing the futility of the drunk's own attempt to control the state of his body, Buysse equally criticised the ignorance of the patient and his easy belief in that what appears scientific and therefore seems to be offering a weighty solution and infallible truth. Ultimately, in the novel, the self-medication proved unsuccessful and like his uncle, also Vital eventually died from his alcoholism.

The final scene, the deathbed scene in *Het bolleken*, was certainly sensationalist as, true to the naturalist formula, the drunkard became mad. Almost 30 years after Coupeau's death from delirium tremens in Emile Zola's *Assomoir* had horrified readers, now the

¹¹¹ BUYSSE, 'Het bolleken'. 446.

terrible visions and convulsions at the end of Vital's life were still a terrific dramatic ending, leaving readers astounded when closing the book.¹¹²

Buyse's naturalist universe the drunk inhabited was far removed from the moralistic world of Hendrik Conscience, although they were both set in the fundamentally isolated world of the Flemish farmers. In Conscience's work, the drunkard had been aware of his weakness and tried to fight against it. Also in Streuvels's story he was conscious of his failing, but fighting could not help, because his determination by nature was too strong. Cyriel Buyse took this one step further, a step that was, according to contemporary opinion, one too far. He did not longer acknowledge the beauty of nature or the pride of the farmer, or the self-respect of the village bourgeois. Buyse instead told a story of the roughness of the farmer's life and character and the dejection of a frustrated intellectual languishing in tedium, both irreversibly stuck in the same Flemish countryside. Alcohol was unavoidable, the need for it imbedded in their condition. It seemed an obvious solace for their predicament but became in fact of course only the acceleration of an unavoidable degeneration.

¹¹² BUYSSE, 'Het bolleken'. 455-456.

2. In the city

With observant pens or paintbrushes, writers and artists depicted the miserable working conditions of the industrial workers and the solace they found in drink as well as the lavish drunken extravagances of the bourgeois. Melodramatic theatre and cinema chose the demise of the drunkard for its gripping scenarios. Those narratives incorporated and contributed to the city's complex dynamics of language, class and gender relationships, staging the drunkard against a backdrop of upheaval and change. From the urban settings in Belgium, where women worked alongside men and exploited workers shared space with wealthy bourgeoisie, overlapping and contradictory narratives of drunkenness emerged.

a. Working class drinking: sex and revolution. Camille Lemonnier's *Happe-Chair* (1886)

Although it was instantly recognizable that the Belgian bourgeois drank their share of alcohol, almost the entire nineteenth century public discourse on drunkenness was centred on working class drinking habits. Most of the story on the 'plague' of working class alcoholism was focussed on male drinking and on the duties of their wives to keep them from it. Only very rarely were there references to female drinking in the medical and political discourses on alcohol. In fictional representations however, in novels and songs, more than one testimonial on female working-class drinking can be found.

Also Camille Lemonnier's novel *Happe-Chair* presented its readers with a female character with an urge for the bottle as its main character. Like Cyriel Buysse, Camille Lemonnier's only notoriety with the wider public was owing to his ability to shock the establishment with his brutal naturalism. Outrage broke out when his first novel

Un Mâle was printed in 1881 in Brussels.¹ Often referred to as 'the Belgian Zola', Lemonnier had to face the courts more than once, both in Belgium as in France, to defend himself against charges of indecency. Lemonnier's work was never widely read in Belgium and he was appreciated as a great writer only by an elite group of avant-garde artists and writers, who regarded him as a role-model.² When Lemonnier missed out on an important state literature prize, his artist colleagues and friends, among whom Constantin Meunier, Emile Claus, Eugène Laermans and many others, organised a banquet in his honour and offered him first editions of his work, illuminated with illustrations by their hand.³

A progressive liberal, with socialist sympathies, Lemonnier lived, like so many other Belgian avant-garde artists, much of his life in Paris and most of his work was published there, where it was received more enthusiastically than in conservative Brussels.⁴ When at home, in Brussels, Lemonnier belonged to a group of socially engaged artists, contributing to the literary activities organised by the *Section d'Art* of the Brussels *Maison du Peuple*, instigated by Emile Vandervelde in an attempt to enlighten the masses with art.⁵

Like most other naturalistic novels by Camille Lemonnier, *Happe-Chair*, was considered

¹ DUMONT, G.H. 'Preface' in LEMONNIER, *Une vie d'écrivain*. 16.

² HANLET, C. *Les écrivains belges contemporains de langue française : 1800-1946*. Liège. 1946. t.I 116.

³ Prof. Emile Kesteman, in the *Musée Camille Lemonnier* museum in Brussels, showed me these unique illustrated works.

⁴ OGNOVSZKY-STEFFENS, J. 'La 'bohème' belge à Paris au XIXème. Des peintres belges en quête de formation de reconnaissance et de réseaux.' in MORELLI, A. ed. *Histoire des étrangers et de l'immigration en Belgique de la préhistoire à nos jours*. Bruxelles. 1992. 325.

⁵ HERBERT, E. W. *The artist and social reform. France and Belgium, 1885-1898*. New Haven. 1961. 33-34.

as subversive literature.⁶ The novel has been compared with Zola's *Germinal* because of the very similar plots. Both works are naturalistic accounts of the struggles of the workers in the last quarter of the nineteenth century. Published a year after *Germinal* had started to appear in instalments in the beginning of 1885, accusations of plagiarism were heard concerning Lemonnier's novel. But the Belgian writer had long before Zola planned writing such an industrial novel and it has been shown that both authors worked on their respective works in the same period.⁷ Whereas *Germinal* was set among the miners in the North of France, *Happe-Chair* took place in an imaginary iron works community called *le Culot* situated in the Borinage close to Liège, in the Belgian 'Black Country'. The title, *Happe-Chair* refers to the factory, and its destructive potential: the big ovens, metaphorically 'bite' [*happer*] in the workers' flesh [*chair*].⁸ To prepare for his work, like any self-respecting naturalist writer, Lemonnier based himself on 'research'. He had visited, pen in hand, the industrial towns to study the particulars of the people he met, the places where they worked and lived and their local dialect, which – much to the despair of today's reader – he used in his work in dialogue.⁹

Three main themes are intertwined in *Happe-Chair*: drink, female sexuality and workers' revolution. Clarinette entered the story with a corrupt character due to a bad heredity. She squandered her husband's money and she completely ignored her duties, not only in the household, but also as a mother, disregarding the care of her baby Mélie. To make matters even worse, Clarinette entertained several lovers, whom she manipulated skilfully. In the meantime she became ever more devoted to alcohol. Clarinette's

⁶ BIRON, M. *La modernité belge: littérature et société*. Bruxelles. 1994. 99.

⁷ LUC, *Le naturalisme belge*. 106.

⁸ NYSEN, H. 'Introduction' in LEMONNIER, C. *Happe-chair*. Bruxelles. 1994. 8-9.

⁹ LUC, *Le naturalisme belge*. 106.

husband Jacques Huriaux earned enough money to let his wife stay at home to take care of their baby, an ideal situation which many women working in factories could only dream of. But Clarinette was not satisfied, after having worked her entire youth, she felt trapped indoors and instead of taking care for the household and her child, she got drunk with her girlfriends whom she invited over to gossip over cake and a glass of *anisette*. She convinced Jacques to open a café, to provide her with some distraction from the housework while earning a bit extra while he was in the factory.¹⁰ Clarinette's new, modest business was called *les Fanfares* and as the meeting place for the town's music societies the bar became the centre of community life.

But the *estaminet* did not bring in the expected extra money for the household and Clarinette did not watch over the purse strings, as expected from a working class wife. Instead, her spendthrift ways and desire for luxury ruined the couple as she shamelessly ran up debts with all the shopkeepers in town. Lemonnier ridiculed the very ostentatious way Clarinette and her friend were dressed when they went out shopping. The squandering Clarinette had bought a new dress for the occasion and her friend Philomène was

dressed in casts-off of her wealthy cousins, [...] with marabou feathers on her hat and a bustle, which gave her the look of a walking chicken, her egg in her backside.¹¹

Extravagance in dress was repeatedly associated with other inappropriate behaviour for women, like visiting drinking places. In a comical duet sung in the pubs of Ghent, Sies

¹⁰ LEMONNIER, *Happe-chair*.125.

¹¹ LEMONNIER, *Happe-chair*. 117

and Mie gossiped about a neighbour, Lange Trien. Mie has seen Lange Trien on Sunday, noticeably showing off a new dress and nice boots. Sies answered:

O, you don't know the kind of stuff that woman is up to. When we [i.e. men] go for a glass of gin, we don't have to ask anyone. But there, in the corner in the counter, I find her [Trien] every day.¹²

Clarinette and Trien, made the same mistake as the drunkard in Conscience's countryside, they aspire to 'live beyond their means' [*vivre aux dessus des moyens*]. Modesty was the backbone of respectability in Belgian society and abandoning it was a first step towards more and graver transgression.

Clarinette and her friend's outing to the city, dressed up 'inappropriately', set the scene for alcoholic and sexual indulgence. Most of the women's time in the city was spent in a *pâtisserie* where they indulged in sweet cakes after which they went to the *liquoriset* to eat a 'cherry in gin'. There, in the corrupting city, Clarinette met the travelling salesman Giginet, who would take the women to various drinking places and in a bar with dancing girls, they drank punch which, 'added to all their [excesses] of the day, caused their heads to turn and made them mischievous.'¹³ At the end of the evening Giginet whispered an indecent proposal into Clarinette's ear, which she readily accepted. Also here a travelling salesman was once more represented as 'tempter', without decent ethics and corrupted, like the sand-digger had been in Conscience's *Curse of the Villages*.

The impact the combination of drink, sex and women had had on polite society became

¹² 'Gentsche kafépraat (duo)' in WAERI, *Verzameling der volledige kluchtige en politieke liederen van Karel Waeri den Gentschen 'Beranger'*. 333-336.

¹³ LEMONNIER, *Happe-chair*. 123.

equally evident when the sculptor Jef Lambeaux presented the work *l'Ivresse* (*The Drunkenness*) at the Brussels Salon in 1893.¹⁴



27. JEF LAMBEAUX, *L'ivresse*. 1893. s.l. Photo: Flor Burton

Lambeaux was a controversial figure: he was known as a veteran pub-crawler and a 'slave of his passions', both in his work as in his life.¹⁵ One critic wrote that the sculptor was 'drunk of life'.¹⁶ *L' Ivognerie* was a life size plaster representing two naked drunken women, embracing and supporting each other. This explicit representation of female sexuality linked to public drunkenness appalled the genteel visitors of the Salon. But the upheaval about the statue reached its peak when it became known that the models,

¹⁴ The place where this statue is kept remains unknown. I need to thank Dorine Cardyn-Oomen at the Koninklijk Museum voor Schone Kunsten Antwerpen, Francesca Vandepitte at the Musées royaux des Beaux Arts de Belgique, and Bruno Fornari of the Museum voor Schone Kunsten, Gent for their information relating to Lambeaux and this work.

¹⁵ EYLENBOSCH, A. *Jef Lambeaux 1852-1908, ou les passions d'un faune*. Saint-Gilles. 1990. 5.

¹⁶ CONRARDY, C. 'Le statuaire Jef Lambeaux.' *Savoir et beauté*. juin, 1933. 298.

picked up from the street and prostitutes in everyone's imagination, had been really drunk when posing. The debauched artist Lambeaux had presumably made these women drunk, on purpose, so that he could better study and represent the effect of alcohol on the muscles and on their posture.¹⁷

In Lemonnier's scandalous novel, Clarinette's sexual passion always entwined with her devotion to drink grew to be very explicit. Behind the bar she enjoyed the male interest her presence brought about and she sent out mixed messages to her customers. It was easy to be coaxed to drink: always flirtatious, she started drinking now and then a glass offered by a customer, but eventually she emptied entire bottles behind her counter.¹⁸ Lemonnier depicted how she became an outcast in her quarter when her drinking excesses became known: neighbours had seen her zigzagging over the sidewalk, they made fun of her and children would throw stones and shout abuse. Clarinette's drinking was humiliating for her husband as well. Jacques felt that fate had scorned him, by awarding him, hard working and always sober, a drunkard for a wife. The husband, who proved unable to keep his wife's respectability under his marital control, was considered a laughing stock. Like Clarinette, Jacques could not walk around in the neighbourhood any longer without being pointed at with the finger.

The 'cult of the excessive woman', easily lured into temptation of all kinds, flaunting her sexuality and dragging man down with her in her degradation was at the heart of much naturalist art.¹⁹ Unsettling female drunkenness was always coupled with potentially

¹⁷ DUMONT, *La vie quotidienne en Belgique sous le règne de Léopold II. (1865-1909)* 216. & EYLENBOSCH, *Jef Lambeaux 1852-1908, ou les passions d'un faune*.

¹⁸ LEMONNIER, *Happe-chair*. 336.

¹⁹ BIRON, *La modernité belge: littérature et société*. 105. & DIJKSTRA, B. *Idols of perversity: fantasies of feminine evil in fin-de-siècle culture*. Oxford. 1986.

dangerous sexuality. That 'alcoholism leads to libertinage and sponsors prostitution' was also the mantra of bourgeois reformers and medical specialists.²⁰ Towards the end of the novel, Lemonnier depicted Clarinette as having reached the depths of her degradation. She is taken over by an animal-like passion, when seducing a shy and innocent young boy: 'She depraved him,' wrote Lemonnier, 'she deranged him with her large hunger of a female animal [*une femelle*] feverish with alcohol, with lustful ferociousness...'²¹

In the meantime, in the factory of *Happe-Chair*, as a result of continuous misfortunes and worsening conditions, the forbearance of the workers reached its limits and they agreed on a strike. Camille Lemonnier was reacting upon contemporary events: 1886, the year of publication of the novel, would become a portentous date in Belgian social history, a year of widespread industrial action. At the very moment spontaneous strikes brought the entire South to a standstill, in Paris, the novel *Happe-Chair* appeared, describing similar events. Eugène Laermans illustrated the novel with a coloured pencil drawing of a scene of a mass of striking workers, an image immortalised on canvas in the painting *Un soir de grève/Le drapeau rouge*.

²⁰ B.S.M.B.T.LXV, dec 1911.

²¹ LEMONNIER, *Happe-chair*. 344.



28. EUGÈNE LAERMANS, *Un soir de grève/Le drapeau rouge*. 1893. Musées royaux des Beaux-Arts de Belgique, Bruxelles

The story of the workers' unrest in the factory coincided in the novel with Clarinette's alcoholic downfall. It was in her bar that the strike was organised and where, during the work stoppage, the workers gathered to discuss and reflect about subsequent action. The bar did very good business during the strikes and Clarinette revelled in the excitement it brought about:

Clarinette, in her eternal madness, rejoiced. The idea of social unrest, of disorder that was going to invert the hierarchies [*mettre au prise*] between the master and the worker stirred up a shady streak of anarchism in her.²²

In a scene of revolutionary violence, Clarinette became the leader of an angry crowd and, exhibiting her sexuality – her shawl fell from her shoulders and revealed her skin –, she hurled insults and threw glasses from the bar at the police. Lemonnier here invoked

²² LEMONNIER, *Happe-chair*. 305.

assumptions of anarchism related to female unbridled sensuality and of the 'availability' of the female bar-worker. He described how Clarinette exuded a 'feral' attraction to the revolutionary mob and how she was almost raped in her own bar. The frenzy in this scene was equated by Lemonnier to a mass intoxication, brought on by religious fervour: 'they all came to her,' he wrote 'attracted by her naked skin, like toward a priest, with drunken blood in their heads'.²³

But Clarinette, as a thoroughly subversive character announced social revolution in much more subtle ways. Her drinking corrupted cultural conventions of what was feminine and masculine behaviour. Neglecting her household and her child, her entire attitude was described as 'male' behaviour. With her equally debased friends she would go from bar to bar 'drinking while standing upright at the counter, among the men, buying rounds of strong drinks for each other, laughing together [...] patting each other loudly on the back.'²⁴ While Clarinette demonstrated ever more masculine behaviour, Huriaux took over the role of caring figure, although he engaged a female neighbour to do the woman's work: the childcare and cooking. Jacques never strayed from his role of male provider and Lemonnier ensured his hero always retained his manliness. However, in the last sentence of the book we find his daughter, little Mélie, surprisingly aware at a very young age of the social conventions of gender, calling her father, the loving character in her life, 'M'ma'.²⁵

The conflicting representations of the relationship between drink and female sexuality illustrate how by becoming drunk, women overstepped unwritten social rules, which

²³ LEMONNIER, *Happe-chair*. 320.

²⁴ LEMONNIER, *Happe-chair*. 337.

²⁵ LEMONNIER, *Happe-chair*. 361.

made their position towards men unclear and alarming. At the same time, drink could transform women into corrupting sensuous temptresses, as well as deprive them of femininity: changing them into unwomanly figures, copying male behaviour instead. In common with the alarming reports on criminology and female drinking, such narratives emanated from contemporary awareness that traditional power relations, between working and ruling classes and between man and women were shifting. But in Lemonnier's account, subversive action did not endure: the strike died out when the proprietors promised changes and drunken Clarinette headed to self-destruction.

While the angry workers drank away their troubles in gin, Jacques did not participate: 'drink did not for him have the natural attraction it had for the others, he would have to violate himself to defy, by drinking, the black ghost of his pain.'²⁶ Sober Jacques Huriaux represented the perfect working man in the eyes of progressive liberals, such as the temperance doctors or liberal socialists, including Emile Vandervelde. Huriaux was a utopian character. His sobriety was symbolic of his dedication and his will to work without reservations. During the workers' dispute, Jacques had always argued for dialogue with the employers rather than for strike. He read newspapers and was ambitious, and his allegiance was ultimately rewarded when the enlightened factory owners offered him a new career as overseer, which allowed him to pay off his wife's debts. The socialist press was never particularly keen to print *Happe-Chair* for serialisation, although they would publish other works from Lemonnier, like *La fin des bourgeois*. The more radical wing of the socialist movement could not agree with the ideology put forward in the novel: Lemonnier sympathised with liberal paternalistic

²⁶ LEMONNIER, *Happe-chair*. 191.

ideas rather than with socialist reform.²⁷

The narrative of the 'good worker', represented by a character like Huriaux, as reasonable, obedient and abstaining from alcohol, was reproduced and repeated endlessly in the repertoire of the bourgeois and of course, it was at the heart of both liberal as socialist temperance efforts.²⁸ Hippolyte Barella wrote:

One of the first symptoms one remarks with the drunkard, is the loss of taste for work, the loss of necessary energy to dedicate himself to it. In all the strikes it is always the drunks [*les alcoolisés*] who dislike the work and who look for all the pretexts to free themselves from it, who put themselves at the head of the movement. Work honours man, but it demands willpower and willpower is weakened among drunkards.²⁹

Sometimes the utopian character of the sober worker was more ambiguous, as happened when he was portrayed by Paul Heusy. In *Un coin de la vie de misère*, a work that has become known as the first naturalist novel in Belgian literature, published in Paris in 1879, a chapter titled 'study of a poor man' introduced the readers to worker Antoine Mathieu and his relationship with gin.³⁰

Whereas Jacques Huriaux had been completely abstinent, Antoine Mathieu did drink. He admitted that he had drunk for the first time because he wanted to imitate his peers and 'act like a man'.³¹ Since then, every two weeks at payday, he and the majority of his

²⁷ ARON, P. 'Les arts et les lettres de 1886: 'lorsque la race wallon-flamand se réveillait au contact des infernales cuisines industrielles.'" in BRUWIER, M., CAULIER-MATHY, N. a.o. eds. *1886, la Wallonie née de la grève?: colloque organisé à l'université de Liège les 29 octobre, 14 et 29 novembre 1986*. Bruxelles. 1990. 153.

²⁸ PUISSANT, 'Le bon ouvrier, mythe ou réalité du XIXe siècle. De l'utilité d'une biographie. J.F.J. Dauby (1824-1899)'. 878-929.

²⁹ B.A.R.M.B.XI, 1897, 854.

³⁰ LUC, *Le naturalisme belge*. 57.

³¹ HEUSY, P. *Un coin de la vie de misères*. Paris. 1883. 33.

fellow workers would feel 'the taste for gin arise'.³² As they ordinarily never had the money to give in to this penchant, once their pay-check was handed over to them, not many workers could resist, explained Heusy. But Antoine's drinking never amounted to an inveterate habit. The writer, in solidarity with the workers, insisted: 'How many, between the preachers of sobriety, with a quiet stomach and a contented throat, would resist, if they had to go through a similar period of abstinence?'³³ Heusy tried to understand the drinking habits of the workers within their miserable social reality and, with contemporary early socialists, he allowed for the occasional drinking bouts of the workers, which were so much criticised by their bosses and by the morality campaigners. He differentiated, however, between the sanctioned binge drinking at paydays and the habitual drinking of those who could no longer resist the temptation.

Camille Lemonnier never formulated this distinction between social drinking and habitual drunkenness. Neither, in his interpretation, did the urge for drink, or the riotous conduct displayed by the workers, arise directly from material and exterior circumstances. The workers on the streets behaved 'savagely' because they were, in the eyes of Lemonnier and most bourgeois observers, 'uncivilised'. Their actions were ultimately motivated by an internal drive, which could admittedly be weakened or reinforced by environmental factors like education and upbringing.

The contradictory characters of Jacques and Clarinette clearly demonstrate this predominance of a physical predestination combined with environmental factors within Lemonnier's naturalist creation. Clarinette was in her 'revolutionary' behaviour predestined by her negative heredity and also by a miserable childhood. Whereas her

³² HEUSY, *Un coin de la vie de misères*. 34.

³³ HEUSY, *Un coin de la vie de misères*. 35.

husband Jacques Huriaux was offered a steady education and could read and write when he was twelve, Clarinette was not sent to school by her mother until she was nine, so she could do the household chores while her mother drank. After a few years, she was taken away from school again to contribute to the household budget with her work in the factory. Her mother had not merely been a drunkard, but also, like her daughter, an adulteress. But there was more: there were rumours in the town that Clarinette's mother had murdered one of her lovers. Clarinette's father had been a violent alcoholic, he used to beat his daughter: in his drunken fits he would 'break down the entire house, like a wild beast released.'³⁴ Jacques' father, on the other hand, had drunk only once, at his own wedding, and only because his guests had made him. Of his mother we know she was Flemish, and Lemonnier described her as a silent, serious matron, a steadfast presence in Jacques' childhood life. Racial conditions were always an important force for action. Lemonnier himself had Flemish blood and he admired the Flemish farmers, ascribing to them the usual attributes of stubbornness, strength and perseverance.

On the whole in *Happe-Chair*, Lemonnier endowed Clarinette with a bad heredity, further degenerated by a miserable upbringing, while Huriaux's family background was constructive, with an encouraging education to crown it. Literary critic Paul Aron has recognised a striking ambiguity in Lemonnier's characterisation of the two protagonists of *Happe-Chair*. He argued that the writer followed the idea of social and physical determinism in one character, Clarinette, while in his depiction of Huriaux ideas of possible change and self-betterment were stressed.³⁵ Certainly, Huriaux, the model-worker showed that free will and rationality could overcome misery, in accordance with

³⁴ LEMONNIER, *Happe-chair*.63.

³⁵ ARON, P. 'Dans l'ombre de Germinal. Happe-Chair de Camille Lemonnier.' *Bulletin de la société d'études des lettres françaises de Belgique*. I, 1982. 8.

progressive liberal and socialist ideas. Jacques Huriaux decided sensibly that he did not want to drink and his sobriety and ambition would eventually lead to his emancipation. But Huriaux certainly, was also 'gifted' by Lemonnier with a good heredity, which allowed him to take on his environment.

The character of Clarinette on the other hand was indeed completely determined by her heredity, while her miserable upbringing did nothing to redeem her. The fact that she was a social outcast, a drinker and a nymphomaniac was only remotely linked to her surroundings or the way she dealt with the gloom of her upbringing, but was in effect unavoidable from the moment she was born. Her negative heredity did not allow her to overcome her negative environment.

This paradox Paul Aron identified within the relationship between biology, environment and self-realisation is a feature, which is palpable within the entire discussion of the place of drink within heredity and degeneration. As much as alcohol could be an environmental factor leading to degeneration, the urge for it could also be inherited, as a result of degeneration. In *Happe-Chair* this is less problematic than in many other writings, as biology clearly was the more important factor in the attitudes of Lemonnier's characters towards excessive drinking.

With the strike over and rationality victorious, the degenerated drunken woman was chased away from the social body. This key moment is described by Lemonnier in a dramatic scene when Jacques chased Clarinette naked out of the house and onto the street, after he had caught her in the act with one of her lovers. To escape her neighbours mocking and chasing her, she hid in a communal toilet 'with an enormous black hole,

from which a stench of fetid fermentation rose up.³⁶ After this, Clarinette disappeared from the village and no one knew what happened to her next. One can guess she was swallowed up in the black hole of society's underworld. But the insecurity of where she had gone was preoccupying Jacques: 'especially the great silence of *la Rinette* worried him like a threat; he felt her around him, lurking in the shadow of the house.'³⁷ Lurking in the shadows of nineteenth century society after the violent strikes had been repressed, haunting the bourgeois dreams, was always the possibility that social unrest could re-emerge. In the calm after the storm of 1886, doctor Charles Petithan wrote in sinister tone:

The actual calmness in which we live should not encourage us in our illusions.

[...] A people weakened by misery, ignorance and alcohol is a permanent danger.

A similar density of population moves fatally closer to the elements of social decomposition and at every instant a fire might rise up, which, kindled by the popular poison, will soon devour our national edifice³⁸

In *Happe-Chair* the subversive subject of female drunkenness symbolised turmoil, unpredictability and dangerous change in the city where the unruly workers threatened bourgeois hegemony and where working-class women constantly negotiated their presence within the male territory of the city streets. Intricate social relationships in the city were ever more muddled by women who worked in bars, visited bars, drank alcohol, became drunk on it or became dependent on it. *Happe-Chair* was shocking because all the characteristics attributed to female nature were corrupted by Clarinette:

³⁶ LEMONNIER, *Happe-chair*. 351.

³⁷ LEMONNIER, *Happe-chair*. 353.

³⁸ As quoted in HAVELANGE, 'De uitvinding van de wanorde. Het negentiende-eeuwse verbond tussen collectiviteit en gezondheid.' 84.

despised character doomed to ruin. This made *Happe-Chair* also conformist; as a liberal, Lemonnier condemned irrationality and revolution and in the novel, rationality and order were ultimately triumphant.

b. Petit-bourgeois drinking: melodrama and its audience. Gérard Bourgeois' *Les victimes de l'alcool* (1911) and P.F. Van Kerckhoven *De dronkaerd* (1853)

After the turn of the century, new forms of entertainment became available to the working classes beside the bar. People were fascinated with a new form of spectacle: like elsewhere, in Belgium, both men and women of the lower classes enthusiastically welcomed cinema. In January 1912 the temperance newspaper *Het volksgeluk* announced how in Brussels, in almost all of the more than 100 cinema's the city boasted, the 'heartrending drama *Het vergif des menschedom* [*The poison of humankind*]' was shown.³⁹ As in those early days the films shown in the Belgian capital were always French, it is very likely that this film was Gérard Bourgeois' drama *Les victimes de l'alcool*, [*The Victims of Alcohol*] made by the French Pathé Brothers in 1911.⁴⁰

Several existing short French films had already recounted the social problem of alcoholism, the first dating from 1899.⁴¹ This film, *Les victimes de l'alcool* from 1911 was a remake, a new and longer version, of *Les victims de l'alcoolisme* [*The Victims of Alcoholism*]

³⁹ *Het volksgeluk*. 1 januari 1912, 2. & DU CHAMPS a.o., *Beelden uit de Belle Époque*. 153.

⁴⁰ VINCENT, J. J. *Naslagwerk over de Vlaamse film*. Brussel. 2000.31. & KERMABON, J. *Pathé : premier empire du cinéma*. Paris. 1994. 61.

⁴¹ *Le rêve d'un buveur* [*the Dream of a Drunkard*] a very short film of less than a minute was also made by Pathé in 1898. In this film, a drunkard fell asleep on a tabletop in a bar and dreamt about the face of his wife who pestered him about the household money and then of a scène in which he was taken away by two policemen to an asylum, afflicted by delirium tremens. SADOUL, G. *Histoire générale du cinéma*. Paris. 1973. 74.

directed by Ferdinand Zecca in 1902.⁴² The French temperance movement had understood the power of the cinema as a propaganda tool and endorsed screenings featuring alcoholism and its effects.⁴³ It is hard to believe however, that the production houses, certainly more interested in profits than in morals, would have taken on this particular subject matter because of a concern with public hygiene. Rather, they knew that a social melodrama about the plight of the family of a drunken father was a tale that would grab audiences and that was likely to do well at the box-office.

It is possible that the early version of the film was known in Belgium, although in 1902 film distribution was still very limited. If it did reach a Belgian audience, it would have been in tents at local fairs and in vaudeville theatres, as this was where films were initially shown and its audience would have been decidedly working class.⁴⁴ But in 1911 the situation had changed to be different. The appearance of the first fixed cinema theatres in Brussels in 1904, broadened the audience for cinema.⁴⁵ From an exclusively working class entertainment, cinema started to attract toward the First World War also middle-class audiences, those people who had previously been regular visitors to performances of popular drama in theatres.⁴⁶ This shift in audience ran parallel with an important modification of the story of *Les victimes de l'alcoolisme*. Apart from its length,

⁴² *Les Victimes de l'alcool* was one of the first longer films, having a reel of 795 m, compared to the Zecca version of 1902, which was only 140 m long. This meant that the remake ran for more or less half an hour and so it had a much more elaborate story than its predecessors, which had been shorts, some running less than five minutes.

⁴³ LEFEBVRE, T. 'Les victimes de l'alcoolisme. (Pathé 1902)' *Archives. Institut Jean Vigo - Cinémathèque de Toulouse*. L, Mai, 1992. 9.

⁴⁴ WILLIAMS, A. L. *Republic of images: a history of French filmmaking*. Cambridge. 1992. & LEFEBVRE, 'Les victimes de l'alcoolisme. (Pathé 1902)' 8.

⁴⁵ VINCENT, *Naslagwerk over de Vlaamse film*. 31.

⁴⁶ JOWETT, G. S. 'The first motion picture audiences.' in FELL, J. L. ed. *Film before Griffith* Cambridge, Mass. 1983. 200. & HAYWARD, S. *French national cinema*. London. 1993. 50.

the main difference between the original from 1902 and the 1911 remake was that Jean, the protagonist, had been a working-class drunkard in the earlier film and would become 10 years later a petit-bourgeois drunkard.⁴⁷ No longer would his firing at the factory fuel his drinking, but rather the loss of his position in the office. Instead of wearing a workman's shirt and cap, which he did in the 1902 version, the drunkard of the updated story in 1911 sported a waxed moustache and a bowler hat. For the rest the drama had remained more or less the same.

Jean, in *Les Victimes de l'alcool*, shown in Brussels in 1912, was a respected and hard working clerk, whose drinking led to the gradual degeneration of himself and his family. The audience was introduced to a happy middle-class family in a well-furnished family home. But, things soon turned sour, when colleagues of the office convinced Jean one night to come and play a game of billiards with them. After refusing at first, he gave in to the pressure and the evening finished with Jean having to be carried home, hopelessly drunk. Six months later, Jean had become an incorrigible drunkard. He took a bottle to work and when discovered his chiefs were informed and dismissed him. In the film, poverty now struck the household and the wife had to borrow money, which the drunkard then discovered and drank. The situation went from bad to worse until Jean and his family were ejected from the family home.

Les victimes de l'alcool was reviewed as 'a well acted social drama, that aptly elucidates the alcoholic heredity'.⁴⁸ Indeed, the children of Jean suffered in their turn from their fathers' hereditary alcoholism. The son, Jacques, would turn to crime and became involved with a housebreaking gang, while his little sister Marie suffered from

⁴⁷ 'Pathé i film' XXIV mostra internazionale del nuovo cinema. Pesaro, 11-19 juinio 1988. 2004. 20.

⁴⁸ *Het volksgeluk*. 1 januari 1912, 2.

tuberculosis. To treat the daughter's illness the mother Louise managed to save enough to buy her daughter the much needed prescription: red meat and red wine. But the hideous drunkard came across the wine and drank it himself. Lost in her battle against vice and misery, when her daughter died, Louise lit a stove and killed herself, while Jean lost his reason, and was carried away to the madhouse.



29. The delirious drunkard locked up in a padded cell. Scene from *Les Victimes de l'alcoolisme* from 1902.

Collection Cinémathèque Française.

An English reviewer elatedly described the last scene in the madhouse:

Pent in a narrow straw-padded cell, we see the maniac raving and gibbering in the agony of his lunatic fury. [...] with foam dripping from his distended jaws the mad man hurls himself upon the ground, clawing with his bleeding fingers at his face, his clothing and everything about him.⁴⁹

Then the drunkard died. The madhouse, as the outlandish performance of delirious Jean proved, was constructed in this representation once more as a prime site for sensational

⁴⁹ 'In the grip of alcohol, a wonderful drama.' in *The Bioscope*. July 20, 1911. 109-112.

drama.

This popular film employed yet again narratives related to drinking that people had become familiar with and by now had come to expect.⁵⁰ All the familiar elements were present: the victim^{ised} wife and children, their demise into disease and poverty and a desperate ending for the drunkard in the lunatic asylum. It was the audience that had determined the shift in the narrative from a working-class household to a petit-bourgeois family. Viewers expected to be able to relate to the characters and now that they were played in flesh and blood before their eyes as it were, even more so. The cinema as the essential popular entertainment was yet another medium that had taken on and shared the same sensational narrative in the period towards the First World War.

The petit-bourgeois visitors to the cinemas in Brussels were the grandchildren of a generation of shopkeepers and clerks who used to enjoy popular melodramatic theatre as a pastime in the city. The type of performance, the style of writing and acting of Bourgeois' film and the success it engendered found its roots in this form of popular culture.

On 6 October 1853, Flemish-speaking petit-bourgeois audiences enjoyed a premiere of a drama in three acts by Pieter Frans Van Kerckhoven in Anwerp, called *De Dronkaerd* [*The Drunk*]. Van Kerckhoven, from the generation of Hendrik Conscience, was a failed doctor, turned author of Flemish popular dramas.⁵¹ The story of this melodrama was once more the identical story of decline and fall of a respectable man enticed into drink. As in Bourgeois' film, the drunkard was not here a working class character. The

⁵⁰ STAIGER, J. *Interpreting films: studies in the historical reception of American cinema*. Princeton. 1992. 81.

⁵¹ BORK, G. J. & VERKRUIJSSE, P. J. *De Nederlandse en Vlaamse auteurs : van middeleeuwen tot heden met inbegrip van de Friese auteurs*. Weesp. 1985. 314.

guidance notes for the set design of the play gave away the social universe the audience had to think of: 'a ramshackle bourgeois interior with expensive but run down furniture'.

The main character of the story was the son of the drunkard: hard-working clerk, Frans. He was the only breadwinner in the family, as his father, Baptist, had wasted all the painstakingly gathered family fortune on drink. His ill and suffering mother reminded her son and the audience, that a few years ago still, the family 'could be called respectable, when your father employed around fifty workers and when his affairs were still successful'.⁵² But then disaster had struck, business had slackened and father had taken to drink. The direct cause of his demise had been, however, his pride, that same dreaded vice that had eventually brought down farmer Staers in Conscience's contemporary story. The drunkard had refused to take up a job as a worker, after having been the person in charge for so many years and gradually unemployment had led to desperation and the bottle. 'First only occasionally,' Frans explained 'because one does not fall at once into the deep abyss, but gradually he gave himself more and more... to drunkenness and it had become a habit.'⁵³

The drama of *De Dronkaerd* started off with the terrible news that the son Frans, who was now alone responsible for the care of the household, had lost his job as well. His boss had fired him because 'he desired no longer to keep the son of a drunkard, a scandal of the streets, in his office'.⁵⁴ The event of Frans' dismissal and his demure acceptance of it, demonstrate how much the respectability of the petite-bourgeoisie was felt to be

⁵² VAN KERCKHOVEN, P. F. *De Dronkaerd. Drama in dry bedryven*. Antwerpen. 1854..4.

⁵³ VAN KERCKHOVEN, *De Dronkaerd. Drama in dry bedryven*. 21.

⁵⁴ VAN KERCKHOVEN, *De Dronkaerd. Drama in dry bedryven*. 5.

depending on their and their families' public performance. However, not a working-class drunkard, Baptist did not drink beer or gin. When the proprietor of his local bar came to call with the family to collect the father's debts, on the list of drinks to be paid for there are all sorts of upmarket liquors. *Maagbitter*, *Elixir d'Anvers*, a popular local drink and *Menthe* were drinks generally known and promoted as healthy and fortifying *apéritifs* or *digestifs*.

The long-suffering mother in the play would always defend her husband and was the epitome of the 'martyr wife'. When Baptist threatened his wife with violence, she submissively urged him to go ahead: 'Do kill me at once, rather than letting me suffer a slow martyr's death⁵⁵'. But ultimately, the wife was, once more, the only one who could exact some respect from her drunken husband. When she had spoken her theatrical sentence, the stage directions urge the actor who played the father to 'retreat, touched by her words'.⁵⁶

The wife died from misery and the drunkard went from bad to worse. His atrocious acts steered an absurd plot involving the theft of a jewel. In a final melodramatic scene the drunkard admitted all his crimes and he jumped out of the window to his death. Frans now became a teacher, one step up the social ladder from being an office clerk, and he and his wife lived happily and soberly although modestly, ever after.

The casting of a petit-bourgeois drunkard was certainly also here correlated with the audience that the writers had envisaged. The nature of the medium of melodrama itself was equally linked to this choice. Popular drama and cinema were essentially sensationalist media, always in search of new dramatic narratives. The very old, well-

⁵⁵ VAN KERCKHOVEN, *De Dronkaerd. Drama in dry bedryven*. 19.

⁵⁶ VAN KERCKHOVEN, *De Dronkaerd. Drama in dry bedryven*. 19.

known story of the working-class drunkard had become exceedingly familiar. The image of the 'drunk worker' was entirely situated, both literally and metaphorically, within the public domain. But while the story of the working-class drunkard no longer delivered satisfactory material for good melodrama, peeping through the drawn curtains of fellow members of their own class, the distinctively prim and proper petite-bourgeoisie made for more attention-grabbing drama. Witnessing the failed effort to conform to expected social conduct linked back to real-life anxieties, and offered sensation and scandal: the ingredients for successful melodrama. The fall from grace for the lower middle-class family was much more dramatic than for a working-class family, which was seen to be accustomed to live with drinking and excess and for whom drinking was always represented as 'normal'.

The main difference between Van Kerckhoven's play and *Bourgeois'* film more than half a century later was the addition of concepts of alcoholic heredity and physical degeneration in the latter. The decline into madness and the incarceration in the lunatic asylum were also aspects that were not brought up in 1854. Although it is very likely that Van den Kerckhoven as a doctor knew of cases of delirium caused by excessive drinking, he did not fabricate such a finale for the drunkard in his play. Instead, the drunkard in the end showed remorse to such an extent that he hurled himself through the window, unable to live with his guilt. Nor were the drunkard's children affected by this vice, quite the opposite. The drunkard's son, Frans, survived the distress and modestly clambered out of the social pit dug by his father. The only person in the play affected by disease was the wife, whose affliction had come about by lack of food through the carelessness and neglect of her husband. In 1853, when the play was written, the relationship between drunkenness and madness and the asylum, between alcoholism and hereditary effects in the offspring was not part of the mental universe of both the

writer and the audience. Instead in Van den Kerchoven's representation drunkenness belonged to an earlier, although not less melodramatic, moral universe, where willpower was central and the drunkard was responsible for the downfall of himself and his family and where biological heredity was not implicated.

But half a century later, this has changed: the film *Les victimes de l'alcool* showed that ideas of hereditary degeneration had by 1911, gained a very central place in the French discourse on drink and thus, through the distribution of such films, also in Belgium. A descent into madness offered vast opportunities for melodrama: the loss of reason symbolised the ultimate fear of many a petit-bourgeois trying to conform. Morality and decency were no longer the only checks for successful living. The ruin of the drunkard's family whose members were innocent, but drawn without any moral defence into ever-deeper downfall because of their heredity determination, offered compelling viewing. There were no heroes in this drama, only victims, as suggested by the title.

In those fictional works, drunkenness was no longer only controlled by moral behaviour or by willpower, but it became imprinted 'in the flesh' and thus engendered madness, crime and disease in the offspring. This shift shows how the ideal of moderation and self-control became objectified in medical ideas that were popularised. This prevalence in dramatic fiction of notions that were at the same time also recorded by medical professionals in their textbooks and case notes, indicates a smooth flow of ideas between science and literature.⁵⁷

But in addition, the popularisation of medical ideas also points towards 'what people

⁵⁷ SMALL, 'In the guise of science'. Literature and the rhetoric of 19th century English psychiatry.' 29.

really thought of science and how they liked to use it.’⁵⁸ The terrible outcome of disease brought upon innocent victims and the ultimate loss of control in alcoholic madness, fuelled the melodrama. The unavoidability of the dreadful results of alcoholism, set now in medical theory, persuasively reinforced the tragedy and therefore added to its attraction.

c. Drinking of the haute-bourgeoisie: decadence and degeneration. Eugene Zetternam’s *Mijnheer Luchtervelde* (1848) and Camille Lemonnier: *La fin des bourgeois*. (1892)

The work of Eugene Zetternam offers a good example of literature both being imbedded in the dominant cultural character but also disputing its hegemony. He tried to break with bourgeois models, but ‘inconsciously’ still celebrated the wisdom of the petit-bourgeois’.⁵⁹

Zetternam, pseudonym of Joost Jozef Diricksen, was born in a petit-bourgeois family and was a housepainter by day and a self-taught writer by night. He aimed his work directly at the workers, writing in their language, Flemish, and intended to address themes of their interest. Zetternam lived in the industrial town of Ghent, where he was confronted with the misery of the urban workers, problems he addressed in his work.

Although Zetternam’s stories were certainly not less moralising than Conscience’s, his work was considered potentially dangerous reading material. Even if his books were widely read among a small group of literate workers, Zetternam made little impact during his short life-time. It was thanks to the socialist party that his works knew a

⁵⁸ COOTER, *The cultural meaning of popular science: phrenology and the organization of consent in nineteenth-century Britain*. 2.

⁵⁹ VAN ISACKER, *Mijn land in de kering: 1830-1980*. 27. & BROUWERS, *Literatuur en revolutie*. II. 72, 89, 213.

revival in the late nineteenth century and his novel *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. [*Mister Luchtervelde. Truths from our time*] became in 1885 the first Flemish work to be serialised in *De Vooruit*, the socialist newspaper.⁶⁰

In this novel Zetternam tackled the appalling social conditions of the cotton workers in Ghent. It was written in the revolutionary year 1848 and then, the 'socialist' undertone in the novel was not received enthusiastically in the current political climate. Apart from a general theme of class antagonism, Zetternam also tackled issues that were deemed completely unacceptable for reading aimed at working class people: there are references to suicide, marital rape, prostitution, venereal disease and violent drunkenness. The story became even more unacceptable, considering that the purveyor of all this harm in the story, the M. Luchtervelde of the title, was a wealthy industrialist, bad to the core. He mistreated animals and showed pleasure in other people's suffering. He also was known to visit 'those detestable houses one cannot name'.⁶¹ A sexual pervert, he pursued all the female workers in his factories, fathering a long list of illegitimate children.

When Luchtervelde came home drunk, which happened often, his estranged wife Clara was the target of his aggressions. It was during a drunken fit that Luchtervelde committed one of his worst crimes: he raped his own wife, demanding her to perform her duties. The writer, although daring in his themes nevertheless described the event in a thoroughly camouflaged style. The rape was recorded as written by the chaste Clara in her diary as follows:

⁶⁰ VRECKEM PAUL, H. S. *De invloed van het Franse naturalisme in het werk van Cyriel Buysse*. Brussel. 1968. 17. & DE NIL, B. 'Zetternam en Zola. De Vlaamse sociaal democraten en hun literaire mythen vóór 1914.' *Brood en rozen*. III, 1, 1998.

⁶¹ ZETTERNAM, E. *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. Antwerpen. 1848. 145.

... utterly drunk [*brooddronken*] he laughed madly, while he crushed me with the gaze of his empty eyes. And then... do not ask me what happened then [...] something that makes one shudder when remembered and that one does not write down... ⁶²

Zetternam's contemporary Conscience had connected drunkenness in *Eene uitvinding des duivels* with all kinds of diseases, but never with venereal disease, a subject totally unfit for Conscience's idealised creations. Zetternam touched the highly fraught subject of venereal disease, but again in extremely obscured allusions. After the incident, Clara started so suffer from a strange disease, which made her feel, 'as if lechery had stung me' and like 'her blood was rotten in her veins'. When she finally dared to call a doctor, she wrote after his visit:

I suffered the punishment for lascivity and had never lived in sin! I was infected with that secret plague sent to the world only to punish humankind for its brutishness [*hunne dierlijkheid*]. ⁶³

She had to be treated with 'murderous means', referring obviously to harsh mercury treatment, which 'eradicated [her] beauty given by God.'⁶⁴ Zetterman described dramatically how Clara's teeth started to rot and how her hair fell out and addresses thereby the idea that the disease was brought on as a punishment, in the same way the language in the patient registers of the Ghent asylum interpreted *paralysie générale* as a retribution for immoral behaviour.⁶⁵ Clara was eventually healed and managed in the

⁶² ZETTERNAM, *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. 163.

⁶³ ZETTERNAM, *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. 165.

⁶⁴ ZETTERNAM, *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. 165.

⁶⁵ see above II Drink and the doctors. 2. In practice: the alcoholic population of the Ghent asylums. pp. 175-245.

end to overcome her unhappiness in religion and charity, supporting her husband's exploited employees, while Luchtervelde himself died a painful death, the outcome of his unnamed disease.

In Zetternam's work the workers were never drunkards, instead, they were represented as idealised morally strong characters. At the end of the novel the workers were victorious, which meant in Zetternam's mild socialist view that they had climbed up the social ladder. The carpenter Louis for example, whose wife Marie had been one of Luchtervelde's victims, became a *patron* himself, having apprentices under him. He was determined to give them a honest wage and to 'take care they do not drink it'.⁶⁶ While Luchtervelde represented an old system of authoritarianism, where position of society was dependent only on property rather than also on demeanour and moral standards, the character of Louis embodied a new paternalistic system, advocating social flexibility through the assumption of 'modern' bourgeois values like moderation.

Almost half a century later, Camille Lemonnier also addressed bourgeois drunkenness. *La fin des bourgeois*, published in 1892, took place in the plush salons of Brussels and in this novel, the writer described the undertakings and relationships of different members of a large and wealthy industrial family. The family suffered from racial decline as a result of exaggerated luxury and debauchery, an idea based upon the history of a family as in Zola's cycle of Rougon-Macquart. The old, moneyed Rassenfosse family had become rich thanks to mine exploitation and the family had now, in its third generation of opulent living, become completely debased, heading, as the title implies, to final

⁶⁶ ZETTERNAM, *Mijnheer Luchtervelde. Waarheden uit onzen tijd*. 197.

dissolution.⁶⁷

The family members of the Rassenfosse family represented all the various types of what Lemonnier saw as the degenerated haute-bourgeoisie. Daughter Ghislaine had an illegitimate child with a servant and was made to marry an impoverished nobleman who abandoned her and squandered her entire fortune. Her sister Simone had hysterical attacks and dramatic nervous breakdowns; brother Regnier was a decadent dandy and brother Arnold was mentally retarded. Cousin Antonin was pathologically obese; cousin Sybille was lethargic and manically depressed and uncle Eudoxe had an extramarital affair... and thus the line up of perverted and immoral characters continued.

In *La fin des bourgeois*, there was not one, but many drunkards. Alcohol and the exuberant use of it served to illustrate the decadence of the family. Drunkenness had become 'normal' acceptable behaviour within the closed universe of a decadent rich family. The Rassenfosse family, as a wealthy family would, celebrated weddings, births and job-appointments with lavish banquets, consisting of all kinds of exquisite food and wines.⁶⁸ But they could not keep their consumption in check and would always exaggerate. At the wedding of his sister Ghislaine, for example, Arnold managed to drink three bottles of champagne just by himself.⁶⁹

More than one member of the family showed a particular fondness for the bottle. Quadrant, the son-in-law, was a heavy drinker who daily emptied three bottles of burgundy. He made a point of honour of making his guests drunk 'until vomiting' with

⁶⁷ HANLET, C. *Les écrivains belges contemporains de langue française: 1800-1946*. Liège. 1946. t.I 117

⁶⁸ see above: I. Drinking in Belgium. 1. Drink and Belgian identities. p. 57.

⁶⁹ LEMONNIER, *La fin des bourgeois*. 64.

a selection of great vintages from his cellars.⁷⁰ Another drinker of the family, more subtle than Quadrant, was Regnier, the over-sophisticated son of businessman Charles Rassenfosse. Like Zetternam's Luchtervelde, Lemonnier's Regnier Rassenfosse drank out of boredom, to give some flavour to the monotony of his aimless life. Although the writer experimented with a Huysmans-like symbolist style in this novel, Lemonnier's universe still remained naturalistic and accordingly, the character of Regnier was defined by his heredity. Regnier's fondness for alcoholic excess was related to his moral and physical predisposition as progeny of a degenerated bourgeois family. Lemonnier described how with 'thin lips and over-refined manners' Regnier showed the manifestation of a vigorous physical heredity turned into intellect, absorbed in the brain lobes. A corrosive energy was fermenting in that young and bilious carnivore.⁷¹

Generally, while towards the end of the century medical discourse gradually took on aspects of heredity and degeneration to explain excessive drinking, in literature too, it was heredity and inborn constitution, rather than personal moral choice that led unworthy characters to the bottle in works written in the last decades of the century. Among Flemish writers describing the inhabitants of the countryside, the moralistic view of Conscience, for example, had been shockingly challenged by the naturalistic work of Buysse. And while in the theatres in 1850, petit-bourgeois audiences were relieved to understand that the children of the penitent drunkard on stage lived happily ever after, by 1911, filmgoers were confronted with the irreversibility of parental drinking, passed on mercilessly to the innocent offspring of the drunkard.

Similarly, in literature of the mid- nineteenth century, drunkenness and other vices

⁷⁰ LEMONNIER, *La fin des bourgeois*.97.

⁷¹ LEMONNIER, *La fin des bourgeois*. 25.

among the upper classes, as shown by *Mijnheer Luchtervelde*, had been explained as avoidable immoral choices. But now in the 1890's, in *La fin des bourgeois*, the strong hereditary aspect added to the story of the debauched bourgeois, annihilated that willpower. Being born a Rassenfosse, meant to be tainted with vice and therefore intellectual but bored and frustrated Regnier was afflicted by a hereditary nervousness. Regnier himself acknowledged that the cause of his 'behaviour' was located in his physical degeneration and he put it forward as a motive for not making any efforts to better his ways. But while his propensity for drink was lodged within his heredity, there continued to be a social and moral aspect to it. Lemonnier described how Regnier felt very ill at ease about his position in society, realising the striking poverty of the workers in his family's mining enterprise. His act of rebellion, his reaction against this was to squander his father's money in gambling, prostitutes and drink.

One evening, Regnier, his cousin Antonin and a friend drove back to the city with a couple of prostitutes, after having enjoyed a wine- and champagne fuelled 'picnic' in the forest. While the others were tired, half asleep in the carriage, 'heavy through drunkenness', the alcohol had made Regnier's mind only more restless than usual: 'he felt his nerves poking, undergoing confusing itches, directing [his mind] towards delicate and evil dreams. But what to invent next? he asked himself.'⁷² When they passed a beggar walking along the road, Regnier came up with an *idée merveilleuse et diabolique*.⁷³ He invited the beggar into the carriage and took him to town, with the promise of a meal. In the beggar, Regnier envisaged a lost world of humility. When the party arrived in an expensive restaurant with the tramp, Regnier ordered plenty of champagne and

⁷² LEMONNIER, *La fin des bourgeois*. 190.

⁷³ LEMONNIER, *La fin des bourgeois*. 192

specifically a bowl, which he filled up with three bottles of the expensive drink. When this amount proved not enough to fill the basin he demanded without hesitation three more bottles to add to it.

Regnier then instructed one of the prostitutes to loosen her hair and he made her wash the foot of the beggar in the basin of champagne and dry them with her hair. This was of course a direct reference to a Bible story, in which Mary Magdalen, 'who was a sinner', approached Jesus and 'wet his feet with her tears, and wiped them with the hair of her head.'⁷⁴ This biblical reference would have been readily identified in Catholic Belgium and immediately recognised by the diners in the imaginary restaurant, but also by the reading public. In re-enacting the scene, casting an actual prostitute in the role of St. Mary Magdalene and a poor beggar, picked up off the street in the role of Christ himself, Regnier without doubt crossed the line of what was deemed acceptable. By attributing these specific roles to those particular characters Lemonnier condemned the attitude of the drunken, irresponsible and sexually debauched party of bourgeois and praised instead the dignified self-control of 'the poor', who could not even afford food, let alone drink. This scene has to be read in the light of social critique on the self-indulgent lifestyle of the propertied class it described. The water that stood for cleansing and the washing away of sin, had become champagne, the expensive alcoholic drink symbolising more than anything debauchery and drunken excesses of a morally degenerated upper class. The 'waste' of an exclusive wine demonstrates the readiness with which Regnier wasted his father's fortune, in sharp contrast with the absolute destitution of the vagrant. While the fictional occurrence did not directly link to reality, it was distressing because the scenario was offered as a possibility for reality.

⁷⁴ *The Bible*, Luke VII 37-50.

Eugeen Zetternam in *Mijnheer Luchtervelde*, had earlier already depicted bourgeois corruption opposite idealised working-class sobriety. The theme became central in the depictions of drunkenness and reaffirmed 'enlightened' middle class ideals: the progressive bourgeois project of sobriety and moderation. The civilising mission of the bourgeoisie had to be maintained by its own supreme moral position and decadent characters like Georges Luchtervelde and Regnier Rassenfosse stood for exactly the opposite. Those exemplary characters were rooted in the subsistence of a conservative bourgeoisie that was felt to be no longer able to sustain itself within the new values a changing society demanded and whose obstinacy and isolation had even fuelled social instability. Their excessive drinking debased them to the same immoral level as the working classes they so abhorred and was at odds with their claims to social and moral supremacy. Contemporary art and literature, rooted in a system of progressive liberal values, staged exemplary characters of decadent and disgraced wealthy upper classes defying respectability.

The debauched and sick bourgeois necessarily had to be positioned alongside healthy working class characters that, paradoxically, had overcome their 'natural urge for drink' and exhibited a sober and industrious lifestyle instead. Drink was to be held responsible for causing poverty and abjection, instead of unfair social conditions. In those representations, health was invoked as the deserved reward, sickness as the punishment brought upon oneself. The contradictory characters of the good and healthy worker versus the bad and sick bourgeois were essential to maintain a dominant social character and the continuous reappearance of this particular narrative in realist fiction, helped to uphold the account as an ideal for reality.

The representation of this specific form of relationship between social classes related to drink, was once more repeated in a painting shown in 1875 at the Brussels Salon.

L'aube [At Dawn], although provocative, pleased visitors to the Salon and made its creator, Charles Hermans promptly famous.⁷⁵ The theme of drunkenness in a 'realistic' setting had been previously reserved for smaller scale genre-paintings, but became now for the first time presented on a large scale, a format that until then was reserved for grand historical themes.⁷⁶ This painting was modern as well, because of its interest in light, introducing impressionism in Belgian art-history.⁷⁷ The positive reception of the large and explicitly 'modern' work sanctioned and reinforced the system of belief of a progressive fin-de-siècle bourgeoisie the painting conveyed.



30. CHARLES HERMANS, *L'aube* 1875 Musées royaux des Beaux-Arts de Belgique, inv. 2812. Bruxelles.

⁷⁵ DENOËL a.o., *Le nouveau dictionnaire des Belges*. 369.

⁷⁶ MARECHAL, D. ed., *Musée d'Art Moderne. Oeuvres choisies*. Bruxelles, 2001. 54-55. as quoted in http://www.opac-fabritius.be/fr/F_database.htm & BAUDSON, P. 'Du constat à l'interprétation. L'art social de Joseph Stevens à Eugène Laermans.' in ROBERTS-JONES, P. a.o. *Eugène Laermans, 1864-1940*. Crédit Communal, Bruxelles. 1995. 51-65.

⁷⁷ STARK, 'Charles de Groux et le réalisme social dans la peinture belge.' 51.

The painting shows a group of workers who on their way to work stumble upon bourgeois drunken revellers, leaving a café. The workers watch the scene with abhorrence and one of them, a father, looks at his young son with a meaningful frown. The miners come across as unexpectedly clean, healthy and well-dressed: the father is depicted as wise and knowing, his child bright and well-nourished and so seems his blushing mother.

At the centre of attention of *L'Aube*, are not the two men in their expensive but crumpled suits and with their top hats crooked on their hats, but the drunken women that accompany the men. It was clear straight away by the working class onlookers in the painting, but also by the visitors of the salon, that these women were the opposite of respectable. Although they are magnificently dressed, the drunken prostitutes come across as the opposite of clean and healthy: their skin is pale and their eyes lie deep in dark sockets.

That public drunkenness was the ultimate signifier to delineate the crossing of the borders of respectability, especially for women, was also superbly shown in Cyriel Buysse's novel *Het bolleken*. The bourgeois main character, Vital used to meet his mistress Irma in a *café-concert* in the city. When Vital met a gullible inhabitant of his village, who frequented the same drinking place, the last one believed the charade; he was very impressed with the 'lady' who accompanied Vital. Vital, however, recognised very well the difference in class between himself and his lover. Irma was a Flemish social climber and in order to create a more sophisticated identity she spoke French. By having her speak the language abominably, Buysse immediately elucidated the class and gender rules in the *café-chantant*. Although Irma tried very hard, it was ultimately not only her abominable French that gave her real social standing away. 'She wanted to pretend to be a sophisticated lady' explained Buysse, 'he [Vital] was slightly annoyed, because he

knew she was different; because he had witnessed her more than once, half drunk with champagne, blaring as the street girl she actually was.⁷⁸ So while dress could perhaps engender confusion about women's actual standing in society, a weary and unhealthy countenance, ghastly French but especially public drunkenness would eliminate all doubt.

Fin-de-siècle painters and writers who repeatedly depicted drunken women from other social classes, on the other hand, never represented alcoholic bourgeois. Not even Camille Lemonnier, Cyriel Buysse, or Félicien Rops, who did not mind upsetting social conventions and who controversially had depicted drunken working class women, give us a glimpse of a woman of their own class getting drunk. The reason for the lack of representations of inebriated bourgeois women is obvious: even more than for working women, for ladies, drinking too much was a socially completely unacceptable act, and because it was considered as 'the ultimate humiliation', it would always remain private.⁷⁹ There was always the looming underlying possibility in the texts that Lemonnier's character of the Mary Magdalen or the showily attired demi-mondaines in Herman's painting, had been 'real' ladies before they had taken to drink. The moral power of the sober and noble matriarch of the Rassenfosse family, 100 year old Barbe, was symbolised by the fact that she never drank and only at the very special occasion of her name-day, 'she consented at having her lips wetted'⁸⁰.

Fictional representations of drunkenness embodied widely shared social meanings and were informed and consequently adapted and reshaped by readers' and authors'

⁷⁸ BUYSSE, 'Het bolleken'.350.

⁷⁹ *De Sint Jansbode. Maandschrift tegen alcoholism*. XXVIII, 28 jan 1894, 114.

⁸⁰ LEMONNIER, *La fin des bourgeois*.281.

experiences. Contemporary writers and artists mostly endorsed the belief-system of reformist liberalism and condemned drunkenness for corrupting the essence of its hegemony: rationality and moderation. Towards the end of the century, writers and artists articulate a more critical standpoint and their representation of the drunk spelled out contradictions and tensions prevalent in the social world they experienced. For eminent Belgian historian Henri Pirenne it was no coincidence that the important artistic revival coincided with the social upheavals of the 1880's.⁸¹ Many of the late nineteenth century artistic works I studied – representing an insubordinate character as ‘the drunkard’ – were seen as subversive by the conservative section of the cultural elite, notably the Church, and were consequently censured. Nevertheless, those critical works probably revealed best the ways in which society was organised, and the place of the drunk in it. In general, shifting emphasis in artistic works can be linked to concerns prevalent in contemporary society.

For example, as middle class women demanded their rightful space not only in but also outside the house, in literature and art, the innocent suffering wife, and especially passive wife, the defender of the hearth and guardian of male sobriety, became supplanted in the representations by a possibly threatening active, sexually perverted fallen woman, who would drink excessively herself. But even in the most ‘dissident’ corners, there continued to be a reticence about what remained ultimately the ‘unthinkable’: bourgeois female drinking. Similarly, as working class groups demanded their share in the running of society, and traditional rural areas had to face social transformations, the figure of the male working class drunkard became metaphor of

⁸¹ HERBERT, *The artist and social reform. France and Belgium, 1885-1898*. 67. & PIRENNE, H. *Histoire de Belgique*. Vol.VII. *De la révolution de 1830 à la guerre de 1914*. Bruxelles. 1932. 262.

underlying anxieties of the dominant class, about loss of control and preoccupations about inevitable changes prevalent in the fast changing late nineteenth century society.

But fictional narratives of drunkenness, especially those that were not censured and widely read, at the same time also constructed the way reality was perceived. They organised opinion and made sense of emotions, related to a very unstable and ambiguous experience such as drunkenness. The stories and their response both emulated and negotiated the ever- shifting boundaries, which demarcated the social acceptability of excessive drinking. These boundaries were implicated in the established power relations of a liberal bourgeois society and represented the ideals of its dominant cultural character.

Conclusion

Because drunkenness was experienced within a social, historical space, it was structured in different ways for distinct individuals in particular moments. Drunkenness expressed historically specific values and fears, as the judgment of drinking interacted with categories of class, gender, language and ideology. At certain times various interpretations existed of how much of a certain beverage was considered 'too much' and for whom, and what type of behaviour, as a result of intemperance, was felt to be problematic. Overall, drunkenness represented a moment of chaos in which seemingly permanent cultural boundaries became blurred. Defining drunkenness entailed therefore, asserting, negotiating and constructing social identities and a particular organisation of culture. Starting from this premise that representations of excessive drinking were fundamental signifiers for culture, 'the drunk' became a guide into important historical changes in Belgian society in the second half of the nineteenth and the first decades of the twentieth.

I looked in different places where he, or she, became a subject of concern. To set the scene, I firstly tried to understand how drinking constructed society, as an important aspect of Belgian culture. While the countryside represented old ways of drinking and interpretations of drunkenness, the city, with its new structures and necessarily rapidly adapting cultural formations, symbolised an environment in which drunkenness became more readily presented as a problem threatening the smooth running of society, a 'modern' problem in need of needed a suitable solution. Then I looked in political tracts, in government publications and discussions on legislation how the subject became a political matter, spearheading ideology.

Subsequently I located the drunk in medical discourse, I studied medical writings on the subject and patient registers of mental hospitals that cared for those whose 'abnormal' behaviour was understood to be related to excessive drinking. In the Ghent asylums, as elsewhere in society, what drunkenness meant was constantly negotiated. Finally, these negotiations continued when artists and writers, and popular culture represented drunkenness.

All those texts offered a multitude of interactive narratives on drunkenness. Travelling between different domains of representation, certain 'stereotypes of drunkenness' were formed at the intersection of so many cultural, political and medical ideas. They were certainly ambiguous, even contradictory and always shifting, but continued to recur over the period in different shapes and forms. Those stereotypes always worked within the power relations that engendered them and they reflected cultural categories of class and intertwined with it of gender and race, which they at the same time also helped to construct. They addressed mostly the fantasies and fears of the bourgeoisie for whom drunkenness had become a serious issue of concern in the mid- nineteenth century and were endorsed by bourgeois social commentators, progressive lawmakers, asylum doctors and modern authors and artists. With the established social order endangered, and working classes and women demanding participation in society, the dominant culture needed to reassert itself and re-assess its value system. Moderation became a fundamental idea within the formation of a 'modern' bourgeoisie. The stereotypes of drunkenness reflected middle class ideas about morality, about free will and social environment, but also negotiated opinion and so these representations participated in the construction of a historically specific, powerful hegemonic middle class voice. Against a backdrop of an all-embracing process of modernisation and change, undesirable drunkenness became increasingly considered as belonging to the *immoral*

other, which in its turn defined the *moral self*.

By way of conclusion, I would like to review, in a broad outline, the various 'stereotypes of the drunk' that emerged in Belgian culture in the last half of the nineteenth century towards the First World War and to recapitulate the different sites where they were taken on, constructed and negotiated.

Firstly, central to the bourgeois understanding of drunkenness, in the mid-nineteenth century, was the character of the drunken farmer and industrial worker. Within a bourgeois construction of the lower classes as morally lacking, their drinking was always considered a vice, typical to their class. In the countryside the drunkard, represented the essence of what was believed to be the racially specific inert uncivilised nature of the Flemish. Artists were fascinated with the figure of the 'uninhibited' peasant and although country fairs and festivities continued to worry reformers, they took place in a segregated world. In the cities, however, bourgeois and lower class lived close together. Also here, drunkenness was considered a specific problem of the growing urban working-class masses. But increasingly, in particular after major social upheaval in 1886, drunkenness seemed to affect and undermine also the position of the urban bourgeoisie and it was felt to be related to social upheaval. The *revolutionary working-class drunk* became a character that needed to be contended with and working class drinking became gradually more often identified as deviant conduct, related to madness.

Towards the end of the nineteenth century the heredity nature of drunkenness was ever more stressed. Although reformers continued to argue for moral education of the masses, increasingly the presumed uninhibited nature of the lower classes that was seen to fatally predispose them for alcoholic excess, was articulated. Drunkenness was explained, no longer as a moral choice, but as a definite condition related to disease and

madness: the field of medical specialists. In the context of 'social defense', legislative measures were proposed, widely discussed and partially taken on to constrain disorderly lower class drunks.

'Social defence' was profoundly influenced by medical discourse, which towards the end of the century, placed ever more emphasis on the 'criminal drunk'. In the discipline of 'criminal anthropology' 'medical' notions of 'degeneration' were used to plead for the forced incarceration alcoholics as potential criminals. In the asylum, drunken lower class men were mostly referred to as simply 'drunk' and only when they posed a proven danger for society were they kept in the asylum, diagnosed as 'mad' for a longer period. In the representation of male working class alcoholic, drinking and violence were always combined and the argument of 'dangerousness' became the signifier for the diagnosis of lower class alcoholics. The ostensibly unbiased medical language preferred by the asylum-doctors involved highly prejudiced opinions as to what constituted unacceptable drinking habits. Aspects of heredity were often put forward to account for environmental factors contributing to the onslaught of drunkenness and to explain perceived moral dissipation. The 'naturalisation' of moral aspects of drunkenness in the medical language of heredity and degeneration is exceptionally revealing. Familiar representations of lower class drunkards as violent, dangerous, mad and revolutionary but also of the higher bourgeoisie as decadent and degenerate through over-refinement were articulated, contested and confirmed. Reading the narratives on drunkenness, it became clear that the language of 'degeneration' went hand in hand with that of melodrama. Degeneration, whether moral or biological, represented a spectacular downfall and social order being dramatically disturbed.

In the stories on drunkenness, two recurrent characters were juxtaposed with the main character of the *revolutionary working-class drunk*. One was that of *the suffering wife* and

the other that of *the good, sober worker*. The stereotypical wife of the drunkard defended the political status quo, as with her moral superiority she was to convince the worker to stay away from the pub and to urge him to remain at home, within the framework of tradition. Ambiguously *the suffering wife* represented a bourgeois appreciation of the power of the domestic sphere in a society where working class women were decidedly active in public life, albeit with very limited civil rights. But the figure of the suffering wife, reproduced tirelessly in melodramatic songs, paintings and drama also became a means to place and give meaning to existing realities, soliciting sympathy. The option of forced incarceration of drunken husbands in a lunatic asylum gave wives an opportunity to protect their families from domestic violence, although their dependence on their husband's income often prevented this for women of the lower classes. For women in the higher classes confinement of squandering husbands and debauched sons was a means to safeguard their respectability and fortunes.

The other antagonist of the figure of the *revolutionary working-class drunk* was that of the *good, sober worker*. While the first was depicted wasting his wages in drink and therefore live in self-afflicted poverty, the second's quiet existence would confirm that the limited wages were in fact sufficient. The *revolutionary working-class drunk*, was described as poor and frustrated, easily lured into political movements for change, like revolutionary socialism. The image of the *good, sober worker* from the other hand, who was happy and contented, was brought into play to show that social change was not the answer, but frugality and temperance instead. The liberal reformist cause fundamentally relied on this contradictory character, which, paradoxically, managed to curb the typical or even inborn passions of his social class. This contradiction between an inborn tendency to drink that medical specialists had identified from one hand, together with the idea of self-betterment through moderation and education that the same specialists and

'liberal' bourgeois would preach on the other, was predominant in the discourse on drink. In the asylum, this paradox was negotiated by the patients themselves. Those who understood what were the requisites of 'approved' behaviour of the *good sober worker*, and who conducted themselves accordingly were easily diagnosed as 'not mad', but just drunk, and were allowed to go home accordingly, once sobered up and after having shown remorse. Those who behaved adversely and whose behaviour was believed to be 'unacceptable' would be identified as 'degenerate' or 'sick' and therefore had to remain institutionalised.

The paradox of the *good, sober worker* returned in a second double-act; in opposition to another contradictory character, that of the *bourgeois drunkard*.

Both the *petit-bourgeois drunk* as the *decadent bourgeois drunkard* offered inspiration for melodrama because of the dramatic overstepping of cultural boundaries, steeped in a possible reality, the two characters personified. It was essential to the *petit-bourgeois* to 'keep up appearances' and because of his often precarious economical situation, drunkenness could easily cause a terrifying throwback into the lower classes. The concept of 'degeneration', as an unavoidable moral and biological downfall added to that. The medical temperance movement used this threatening prospect of a 'fall from grace' in their propaganda and in the asylum it became clear that those patients who complained about not being in the right place in the public asylum, but who were unable to afford a stay in the private institution, were sometimes called 'degenerates.'

Within the context of a changing society, the self-indulgent lifestyle of the wealthy bourgeoisie, including excessive drinking became increasingly criticised. While previously the lavish consumption of wine and liquors had always been a way to parade one's wealth and position in society, it became, in the second half of the century ever

more questioned as fitting behaviour for a self-conscious ruling class. The hegemonic voice on drunkenness of the progressive bourgeoisie related heavy drinking to obsolete values of a type of self-indulgent bourgeois proprietor, who, by his ruthlessness was felt to have contributed to the social conflict society was facing in the second half of the nineteenth century. The representation of the *decadent drunken bourgeois* helped to endorse the esteem for the opposite position of an enlightened bourgeoisie, promoting the 'moral education' of the workers, that needed to present itself as an example of moderation and self-control.

However, constructing drunkenness as belonging to *the immoral other*, the principle which also underlied the stereotype of the *decadent drunken bourgeois*, became increasingly problematic and ambiguous when dealing with drunken members of the own bourgeois class. Drinking remained a fundamentally important aspect of a bourgeois lifestyle, just as it played a significant part in working class culture. Therefore, the moral judgment of excessive drinking as formulated by the liberal section of the bourgeoisie had to be carefully negotiated. Doctors realised that drunken anti-social behaviour was not a unique signifier for problem-drinking, when otherwise respectable middle and upper class men inadvertently ruined their family's fortunes and all-important respectability becoming gradually and silently dependent on alcohol. The ruling classes hesitated to take legislative action to curb drunkenness, not only because their own financial interests were directly caught up with the production and sale of drink, but also, because the widespread habit of excessive drinking among the own bourgeois class. The bourgeois drunkard, if condemned by law, would necessarily have to receive similar treatment as drunken lower class individuals, a consequence that was unimaginable.

It had to become possible therefore, in particular cases to identify drunkenness as another form of deviant behaviour, different from that caused by deprived morality. When it was explained as a disease it no longer called for reform and punishment, but for medical care and was therefore no longer directly related to immorality. Doctors could decide to diagnose the middle class drunkard with a form of 'abnormal drunkenness'. The disease of 'dipsomania', for example, came to explain an uncontrollable craving for alcoholic substances specific to women, and, as the evidence from the Ghent private asylum showed, to bourgeois drinkers. Whereas lower class drunkards were more frequently sent home from the public asylum as 'not mad, but just drunk', or they were labelled with a simple *alcoolique*, among the patients of the upper classes drunkenness was more often interpreted as a disease. But although the language had changed, moral judgment still prevailed within the medical diagnosis of 'degenerated' bourgeois drunks in the private asylum in Ghent. The alcoholic *extravagances* committed by the bourgeois gentleman of the 'old guard' were related to indolence and decadence and he was represented as the debauched descendent of an old and wealthy but degenerated family.

Drunkenness was not only called 'abnormal' when it affected members of the bourgeoisie, but always when it concerned women. The *drunken woman* was a character that only rarely received attention, a subject that because of its hideousness was hushed up. However, towards the end of the century some writers, increasingly apprehensive of changes occurring in society, dared sometimes to address this taboo subject. For women, drinking too much was considered without exception deviant behaviour and for ladies the act was unspeakable. Female drinking, more than anything else, undermined the moral pillars of society, an opinion that was directly related to the prescriptive ideology of femininity in the nineteenth century which endowed women with an important

moralising role and a responsibility for maintaining the respectability of their families. The only situation, in which the drinking of alcohol was socially acceptable for women was when it was taken on medical prescription.

The 'invention' of alcoholism as a disease coincided with the awareness that alcoholism could no longer solely be attributed to the vicious ways of the working classes, as also bourgeois and even women drank. A moral paradigm was translated into medical discourse and drink became an problem of the individual, as it became 'internalised', lodged in the unique body. As representatives of the reformist bourgeoisie, medical practitioners established in their practice the border between normal and deviant behaviour and the many classificatory models medical specialists offered to define and thus socially locate drunkenness, fitted in with their ideas of order and structure.

Firmly imbedded in culture, narratives on drunkenness were always ambiguous. Drunkenness was disquieting , because it crossed seemingly stable cultural borders. Consequently, it was to receive a different meaning according to each scenario in which it was set. Changing ideas on drunkenness reflected but at the same time also constructed the ways in which culture was organised in Belgium from 1850 to 1914.

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